

Madame Chair, Members of the 407 Credentialing Review Committee, good afternoon. My name is Rusty McKune and I am the Governmental Affairs Chair for the Nebraska State Athletic Trainers Association. The NSATA would like to thank this committee for the opportunity to come together today for this public hearing. Over the past 4 months, your committee has provided us with the opportunity to share and discuss the proposal to revise the statutes related to the Athletic Training Practice Act. In the time since we started this process in the fall of 2019, we have reached out to twenty-three groups who we feel may have a stake in this proposal. These groups represent both state and national organizations in the education, health care and public sectors. To date we have received 20 responses. 14 have noted no issues with the proposal and have not taken an active position throughout the credentialing review process. We have worked and continue to work diligently with six of these groups to address questions and concerns with the proposal. To date we have secured the support of the NMA and NCPA. The NOTA and NE APTA remain opposed to our proposed language. We would once again like to thank these professional associations for helping us shape the language contained within our proposal- each group has its' fingerprints on what you will see today and we truly feel that all dialogue-supporting or opposing, has helped to make this a stronger proposal. While we have not, and still may not always agree, we do feel that the outcome truly exemplifies that this process should not and is not about us versus them, it is about ensuring that we are meeting the 407 criteria and ultimately ensuring that the process is about public safety.

The 407 credentialing review process has established six criteria that must be met. The impetus of these criteria revolves around three main topics: health, safety and welfare of the public; education, continuing education and skills; and finally a disciplinary process to address the failure to competently perform a new skill. Within the application and the throughout the previous meetings, the representatives of the application group are confident that we have thoroughly and succinctly established that the criterion have been met.

Today we are here to provide additional information and insight to help answer existing questions and to provide answers to new questions that may arise throughout the course of the afternoon.

As we have stated from the beginning, the athletic training practice act in Nebraska is 22 years old. It is antiquated, and fails to reflect the expanded education, continuing education, and the resulting skills and abilities of those who are practicing athletic training today in Nebraska and across the country. Athletic trainers in Nebraska are currently limited to treating a defined population- athletes. As a result, citizens within Nebraska are denied the ability to access athletic training services if they do not meet that definition. Further, Physicians and other providers do not have the freedom to refer patients to health care professionals who possess the qualifications to treat the conditions which those patients have based solely on a population defined by this term- athlete. Thus, it has been and it continues to be our intent and goal to ensure that athletic trainers in Nebraska have the ability to utilize the skills they possess to safely treat the conditions they are educated to treat, not just a defined population of individuals.

As you will see within the context of the application and the final proposed language, the NSATA has gone to great length to ensure that public safety and discipline is exemplified through very clearly defined mechanisms- education, guidelines established with a physician, referral from a health care provider defined within the statute, professional responsibility, and a disciplinary process that is comprised of standards established through our professional credentialing organization and the process

at the state level that is the same for every regulated health care profession in Nebraska. Throughout this portion of the public hearing, you will hear from those who support our proposal provide further explanation and examples of how this is occurring based on accredited standards at the national and state levels.

As indicated, despite the continued collaborative efforts of all involved, while supporting and contributing to a number of changes within the proposal, there remains opposition to specific language in section 38-403 by the NOTA and NE APTA. While the NSATA understands the position that the organizations have taken, we cannot agree to the inclusion of the language that they have recommended in their letters of opposition, on the basis of the arguments that they provide. You will see in their official responses, and may hear today, that they are basing their concerns on public safety, public awareness and perception, and education and training. We feel, and would hope to demonstrate to this committee, that while there is a safety component to their arguments, any such argument can be countered, and any concern rectified, by examination of the language contained within our proposal. Within their respective letters of opposition, you will find language referencing and relative to conditions which athletic trainers are not educated to treat, nor should athletic trainers receive a referral to treat. Further, should an athletic trainer receive a referral to treat such conditions it would be the professional responsibility of the athletic trainer to decline to provide prescribed services. You will also see statements eluding to who is suited to best treat certain conditions based on (more or) less training for specific conditions. We would contend that best treated does not equate to safely treated, and that less training does not equate to training that is inadequate or insufficient to provide safe and effective treatment for a condition. Ultimately, we are concerned that their arguments seek to insert statutory language that is based as much on protecting the professional interests of their members as it is on protecting the public. While we understand that this is the role of a professional organization, we cannot agree that this is the purpose of the 407 or legislative process.

If members of the committee review the evolution of our proposal we are confident that you will find evidence of collaboration and compromise which represents our commitment to this process, to the patients that we serve, and to the public. We have gone to great lengths to not only hear, but to listen to all stakeholders. We have modified, removed and inserted language to provide clarity, remove ambiguity, eliminate confusion and ensure safety. We understand that there is still work to be done beyond the credentialing review process. We are currently actively working with the NMA and NPA to better address language and processes related to the administration of emergency drugs found in 38-405. We have also heard and recognize the concerns voiced regarding assurance of patient safety when it pertains to dry needling. We will continue to work to address this, most likely in rules and regulations. We also understand that our work with those opposing the proposed language is not complete. We will continue to communicate with those groups to better understand and collaborate to the greatest extent possible.

We look forward to the next hour and to providing you the opportunity to hear from experts in the field of athletic training and other professions. We are confident that they will provide a greater insight to the education, the credentialing process and the skills which athletic trainers possess. In the end, we are hopeful that the committee will recognize that the proposed statutory changes can be supported and can be made in a way that fulfills the requirements defined within the 407 Credentialing Review Process.