June 22, 2020

Dear Credentialing Review Committee,

The Nebraska State Athletic Trainers’ Association (NSATA) thanks the Nebraska Physical Therapy Association (NPTA) for the ongoing dialogue regarding the proposal submitted to the Credentialing Review Program. There are several points NPTA brought forth as suggestions. The following is offered to provide initial response to those suggestions.

**Change illness to condition in all instances**

The NSATA is currently reviewing this recommendation. The NSATA would like to reiterate the support of the Nebraska Medical Association (NMA) for the term illness. While this recommendation is currently under consideration, the NSATA emphasizes any changes will only be considered if the changes continue to allow for the assessment, referral and participation in the management of illnesses like those identified by the NMA on page one of their letter of support available on the Credentialing Review (407) Athletic Trainers web page (link to letter: [https://bit.ly/2V8XXqG](https://bit.ly/2V8XXqG))

It is recommended to use “athletic, recreational, or vocational” in 38.403 so it “further clarifies individuals whom athletic trainers may safely provide service”

As identified in testimony at the first two technical review committee meetings and provided in other response letters, the NSATA is seeking to redefine the profession based on what the athletic trainer does, not who the athletic trainer treats.

Contrary to the NPTA’s inference this language would align with the proposed intent, limiting the population athletic trainers can serve to only athletes or individuals who have athlete-like qualities, essentially limits an athletic trainer to rendering care at a level that is less than the full capacity of an athletic trainer’s education and training. That is not the intent of the NSATA in seeking a credentialing review.

Athletic trainers have experienced three advancements of educational standards since the last Credentialing Review completed in 1998. These standards have included didactic and clinical course work which has prepared entry level athletic trainers to work with populations who present with comorbidities and a range of populations from pediatric to geriatric. Domain 2 of the Practice Analysis, as well as Standard 50 and 71 in the CAATE 2020 Standards, demonstrate this advancement best.

**Recommendation to strike “as a result of their education and training”**

The NSATA is opposed to striking this phrase. Although reworded, the spirit of this phrase has been in statute for the past 22 years. The NSATA is concerned striking this wording fails to acknowledge the ability of the athletic trainer to obtain advanced training and post professional education for the provision of services and utilization of skills which exceed those provided in the entry level education identified in 38-411.
Add physical therapist and occupational therapist to the list in 38.404 of professionals from which an athletic trainer may take referral

The NSATA agrees there has been an established and long history of professional collaboration between athletic trainers, occupational therapists, and physical therapists. Because of these existing relationships, the provision for excellent continuity of care and access already exist without time or financial burden to the individual seeking care. As health care professionals, patient centered care is the focus of all three disciplines.

The NSATA will review this suggestion, however; the NSATA wishes to retain a referral process that is adequate for public safety, which may include the need for the professionals listed in this statute to have the ability to diagnose, including the use of labs and imaging.

Increased risk of referral for profit decisions

The NSATA looks forward to further clarification by the NPTA about what specific parts of the proposed language the NPTA identifies as creating potential or increased risk for physician-owned practices employing athletic trainers and potential issue with for profit decisions. The NSATA feels there are legal and ethical parameters in place to protect against this assertion, including the Board of Certification for the Athletic Trainer (BOC) Code of Professional Responsibility and Stark Law. Athletic trainers must adhere to the BOC Code of Professional Responsibility and the ATC credential is subject to discipline should the codes be violated. Specifically, Codes 1.2, 1.5, 3.4, 6.1, and 6.4 address this concern.

Meeting criterion of the 407 process, specifically unmet societal need

The NSATA understands the need to meet all criteria of the credentialing review process and believe each criterion has been fully addressed in the proposal, as well as responses to opponents’ testimony. Language within the current scope of practice limits access to athletic trainers and athletic training services to a specifically defined population – athletes. An entire subset of the general population is prohibited access to these services because they do not fit the definition of athlete yet may be suffering from or limited by the same injuries and illnesses. Further, the current language prevents providers who feel patients would benefit from athletic training services from referring to those services, again based solely on the definition of athlete. The NSATA does not deny there will be an overlap in the services provided; however, the fact those services are already available does not mean the public need is being satisfied.

We appreciate the feedback from the NPTA and look forward to continuing dialogue as the credentialing review process proceeds.

Sincerely,

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