| Submitter: | Kirsten Hopp |
|--------------------------------|---------------------------------|
| On Behalf Of: | |
| Committee: | Senate Committee On Health Care |
| Measure, Appointment or Topic: | HB3824 |
| To Whom It May Concern, | |

My name is Kirsten Hopp and I am a practicing physical therapist in Oregon. I am writing in strong support of HB 3824, the PT Modernization Act. As a physical therapist, passage of HB 3824 is important because it recognizes the vital role that PTs play in Oregon's health care system and the rigorous training, education, and experience that PTs bring to serve our patients. HB 3824 aligns the practice of physical therapy in Oregon with the Model Practice Act established by the Federation of State Boards of Physical Therapy.

HB 3824 will protect the title "Doctor of Physical Therapy or DPT" to ensure that only those holding a doctoral degree in physical therapy are permitted to use this title and abbreviation. DPTs complete rigorous graduate level education with over 1,000 hours of clinical experience to ensure that they are well-qualified to make evidence-based decisions and manage complex patient needs.

HB 3824 allows for physical therapy to order imaging and prescribe durable medical equipment (DME) for patients. These changes would allow for more timely and coordinated care, reducing delays and improving patient outcomes. With this bill physical therapists could certify a patient's disability placard or license plate application. This ability is vitally important especially given Oregon's shortage of providers and can help ensure that patients get adequate accommodations quickly and without unnecessary delay.

HB 3824 aligns the practice of physical therapy in Oregon with the Model Practice Act established by the Federation of State Boards of Physical Therapy – in some cases, like dry needling, expanding care that is available in 46 other states, but currently not available in Oregon. Opposition to this practice misrepresents the rigorous standards we uphold as doctoral-level providers. As physical therapists, we undergo extensive training in differential diagnosis, anatomy, and neuromusculoskeletal care. HB3824 recognizes and supports the level of clinical reasoning and responsibility that our profession already assumes daily. No healthcare profession holds exclusive rights to a specific tool or technique—what matters is the provider's competence and training. Much like exercise prescription or joint mobilization, dry needling is a tool that can be used by multiple licensed professionals who are adequately trained. Restricting its use limits patient access to care, delays appropriate treatment, and fragments the healthcare system unnecessarily. Moreover, many states allow physical therapists to perform dry needling without increased reports of adverse events, supporting its safety and efficacy when used by competent providers.

HB 3824 enhances patient safety by adopting statutory language included in the PT Model Practice Act related to sexual misconduct to ensure that the PT licensing board has appropriate authority related to misconduct that is verbal, physical, and also through electronic means.

These changes do not compromise the safety of the patient and the public. They reflect the training and competence that physical therapists already possess. They reduce administrative and financial barriers while helping patients get the care they need with fewer referrals and delays, especially in rural communities, while preserving oversight through the Oregon Board of Physical Therapy.

I urge the committee to support HB 3824 and help advance the physical therapy profession in Oregon. Thank you for considering this important legislation.

Sincerely, Kirsten Hopp, PT, DPT