Included in this document are laws and regulations of interest to professionals in the field of physical therapy fully up to date with legislation enacted through 2017.

This book does not contain changes made after July 1, 2017.

Please refer to the Board’s website (www.ptbc.ca.gov) for any changes made after this date.
Chapter 5.7. Physical Therapy


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§114. Reinstatement of Expired License of Licensee Serving in Military
(a) Notwithstanding any other provision of this code, any licensee or registrant of any board, commission, or bureau within the department whose license expired while the licensee or registrant was on active duty as a member of the California National Guard or the United States Armed Forces, may, upon application, reinstate his or her license or registration without examination or penalty, provided that all of the following requirements are satisfied:
(1) His or her license or registration was valid at the time he or she entered the California National Guard or the United States Armed Forces.
(2) The application for reinstatement is made while serving in the California National Guard or the United States Armed Forces, or not later than one year from the date of discharge from active service or return to inactive military status.
(3) The application for reinstatement is accompanied by an affidavit showing the date of entrance into the service, whether still in the service, or date of discharge, and the renewal fee for the current renewal period in which the application is filed is paid.
(b) If application for reinstatement is filed more than one year after discharge or return to inactive status, the applicant, in the discretion of the licensing agency, may be required to pass an examination.
(c) If application for reinstatement is filed and the licensing agency determines that the applicant has not actively engaged in the practice of his or her profession while on active duty, then the licensing agency may require the applicant to pass an examination.
(d) Unless otherwise specifically provided in this code, any licensee or registrant who, either part time or full time, practices in this state the profession or vocation for which he or she is licensed or registered shall be required to maintain his or her license in good standing even though he or she is in military service.
For the purposes in this section, time spent by a licensee in receiving treatment or hospitalization in any veterans’ facility during which he or she is prevented from practicing his or her profession or vocation shall be excluded from said period of one year.
(Amended by Stats. 2011, Ch. 296, Sec. 1. Effective January 1, 2012.)

§114.3. Waiver of Fees and Requirements for Active Duty Members of Armed Forces and National Guard
(a) Notwithstanding any other provision of law, every board, as defined in Section 22, within the department shall waive the renewal fees, continuing education requirements, and other renewal requirements as determined by the board, if any are applicable, for any licensee or registrant called to active duty as a member of the United States Armed Forces or the California National Guard if all of the following requirements are met:
(1) The licensee or registrant possessed a current and valid license with the board at the time he or she was called to active duty.
(2) The renewal requirements are waived only for the period during which the licensee or registrant is on active duty service.
(3) Written documentation that substantiates the licensee or registrant’s active duty service is provided to the board.
(b) (1) Except as specified in paragraph (2), the licensee or registrant shall not engage in any activities requiring a license during the period that the waivers provided by this section are in effect.
(2) If the licensee or registrant will provide services for which he or she is licensed while on active duty, the board shall convert the license status to military active and no private practice of any type shall be permitted.
(c) In order to engage in any activities for which he or she is licensed once discharged from active duty, the licensee or registrant shall meet all necessary renewal requirements as determined by the board within six months from the licensee’s or registrant’s date of discharge from active duty service.
(d) After a licensee or registrant receives notice of his or her discharge date, the licensee or registrant shall notify the board of his or her discharge from active duty within 60 days of receiving his or her notice of discharge.
(e) A board may adopt regulations to carry out the provisions of this section.
(f) This section shall not apply to any board that has a similar license renewal waiver process statutorily authorized for that board.
(Added by Stats. 2012, Ch. 742, Sec. 1. Effective January 1, 2013.)

§114.5. Military Service Information Provided on Licensure Applications
(a) Each board shall inquire in every application for licensure if the individual applying for licensure is serving in, or has previously served in, the military.
(b) If a board’s governing law authorizes veterans to apply military experience and training towards licensure requirements, that board shall post information on the board’s Internet Web site about the ability of veteran applicants to apply military experience and training towards licensure requirements.
(Added by Stats. 2016, Ch. 174, Sec. 1. Effective January 1, 2017.)

§115. Applicability of Section 114
The provisions of Section 114 of this code are also applicable to a licensee or registrant whose license or registration was obtained while in the armed services.
(Added by Stats. 1951, Ch. 1577.)

§115.4. Expedited Licensure for Former Members of the U.S. Armed Forces Who Were Honorably Discharged
(a) Notwithstanding any other law, on and after July 1, 2016, a board within the department shall expedite, and may assist, the initial licensure process for an applicant who supplies satisfactory evidence to the board that the applicant has served as an active duty member of the Armed Forces of the United States and was honorably discharged.
§115.5. Expedited Licensure for Military Spouses or Partners

(a) A board within the department shall expedite the licensure process for an applicant who meets both of the following requirements:

(1) Supplies evidence satisfactory to the board that the applicant is married to, or in a domestic partnership or other legal union with, an active duty member of the Armed Forces of the United States who is assigned to a duty station in this state under official active duty military orders.

(2) Holds a current license in another state, district, or territory of the United States in the profession or vocation for which he or she seeks a license from the board.

(b) A board may adopt regulations necessary to administer this section.

(Added by Stats. 2014, Ch. 657, Sec. 1. Effective January 1, 2015.)

§125.6. Unlawful Discrimination by Licensees

(a) (1) With regard to an applicant, every person who holds a license under the provisions of this code is subject to disciplinary action under the disciplinary provisions of this code applicable to that person if, because of any characteristic listed or defined in subdivision (b) or (e) of Section 51 of the Civil Code, he or she refuses to perform the licensed activity or aids or incites the refusal to perform that licensed activity by another licensee, or if, because of any characteristic listed or defined in subdivision (b) or (e) of Section 51 of the Civil Code, he or she makes any discrimination, or restriction in the performance of the licensed activity.

(2) Nothing in this section shall be interpreted to prevent a physician or health care professional licensed pursuant to Division 2 (commencing with Section 500) from considering any of the characteristics of a patient listed in subdivision (b) or (e) of Section 51 of the Civil Code if that consideration is medically necessary and for the sole purpose of determining the appropriate diagnosis or treatment of the patient.

(3) Nothing in this section shall be interpreted to apply to discrimination by employers with regard to employees or prospective employees, nor shall this section authorize action against any club license issued pursuant to Article 4 (commencing with Section 23425) of Chapter 3 of Division 9 because of discriminatory membership policy.

(4) The presence of architectural barriers to an individual with physical disabilities that conform to applicable state or local building codes and regulations shall not constitute discrimination under this section.

(b) (1) Nothing in this section requires a person licensed pursuant to Division 2 (commencing with Section 500) to permit an individual to participate in, or benefit from, the licensed activity of the licensee where that individual poses a direct threat to the health or safety of others. For this purpose, the term “direct threat” means a significant risk to the health or safety of others that cannot be eliminated by a modification of policies, practices, or procedures or by the provision of auxiliary aids and services.

(2) Nothing in this section requires a person licensed pursuant to Division 2 (commencing with Section 500) to perform a licensed activity for which he or she is not qualified to perform.

(c) (1) “Applicant,” as used in this section, means a person applying for licensed services provided by a person licensed under this code.
(2) “License,” as used in this section, includes “certificate,” “permit,” “authority,” and “registration” or any other indicia giving authorization to engage in a business or profession regulated by this code.

(Amended by Stats. 2007, Ch. 568, Sec. 2. Effective January 1, 2008.)

§128. Sale of Equipment, Supplies, or Services for Use in Violation of Licensing Requirements
Notwithstanding any other provision of law, it is a misdemeanor to sell equipment, supplies, or services to any person with knowledge that the equipment, supplies, or services are to be used in the performance of a service or contract in violation of the licensing requirements of this code. The provisions of this section shall not be applicable to cash sales of less than one hundred dollars ($100).

For the purposes of this section, “person” includes, but is not limited to, a company, partnership, limited liability company, firm, or corporation.

For the purposes of this section, “license” includes certificate or registration.

A violation of this section shall be punishable by a fine of not less than one thousand dollars ($1,000) and by imprisonment in the county jail not exceeding six months.

(Amended by Stats. 1994, Ch. 1010, Sec. 1. Effective January 1, 1995.)

CHAPTER 7. Licensee

§464. Retired License Status
(a) Any of the boards within the department may establish, by regulation, a system for a retired category of licensure for persons who are not actively engaged in the practice of their profession or vocation.

(b) The regulation shall contain the following:

(1) A retired license shall be issued to a person with either an active license or an inactive license that was not placed on inactive status for disciplinary reasons.

(2) The holder of a retired license issued pursuant to this section shall not engage in any activity for which a license is required, unless the board, by regulation, specifies the criteria for a retired licensee to practice his or her profession or vocation.

(3) The holder of a retired license shall not be required to renew that license.

(4) The board shall establish an appropriate application fee for a retired license to cover the reasonable regulatory cost of issuing a retired license.

(5) In order for the holder of a retired license issued pursuant to this section to restore his or her license to an active status, the holder of that license shall meet all the following:

(A) Pay a fee established by statute or regulation.

(B) Certify, in a manner satisfactory to the board, that he or she has not committed an act or crime constituting grounds for denial of licensure.

(C) Comply with the fingerprint submission requirements established by regulation.

(D) If the board requires completion of continuing education for renewal of an active license, complete continuing education equivalent to that required for renewal of an active license, unless a different requirement is specified by the board.

(E) Complete any other requirements as specified by the board by regulation.
(c) A board may upon its own determination, and shall upon receipt of a complaint from any person, investigate the actions of any licensee, including a person with a license that either restricts or prohibits the practice of that person in his or her profession or vocation, including, but not limited to, a license that is retired, inactive, canceled, revoked, or suspended.
(d) Subdivisions (a) and (b) shall not apply to a board that has other statutory authority to establish a retired license.
(Added by Stats. 2016, Ch. 473, Sec. 1. Effective January 1, 2017.)

DIVISION 1.5. DENIAL, SUSPENSION, AND REVOCATION OF LICENSES

CHAPTER 3. SUSPENSION AND REVOCATION OF SERVICES

§490.5. Suspension of License for Failure to Comply with Child Support Order
A board may suspend a license pursuant to Section 17520 of the Family Code if a licensee is not in compliance with a child support order or judgment.
(Amended by Stats. 2010, Ch. 328, Sec. 3. Effective January 1, 2011.)

DIVISION 2. HEALING ARTS

CHAPTER 1. GENERAL PROVISIONS

Article 6. Unearned Rebates, Refunds, and Discounts

§650. Rebates for Patient Referrals
(a) Except as provided in Chapter 2.3 (commencing with Section 1400) of Division 2 of the Health and Safety Code, the offer, delivery, receipt, or acceptance by any person licensed under this division or the Chiropractic Initiative Act of any rebate, refund, commission, preference, patronage dividend, discount, or other consideration, whether in the form of money or otherwise, as compensation or inducement for referring patients, clients, or customers to any person, irrespective of any membership, proprietary interest, or coownership in or with any person to whom these patients, clients, or customers are referred is unlawful.
(b) The payment or receipt of consideration for services other than the referral of patients which is based on a percentage of gross revenue or similar type of contractual arrangement shall not be unlawful if the consideration is commensurate with the value of the services furnished or with the fair rental value of any premises or equipment leased or provided by the recipient to the payer.
(c) The offer, delivery, receipt, or acceptance of any consideration between a federally qualified health center, as defined in Section 1396d(l)(2)(B) of Title 42 of the United States Code, and any individual or entity providing goods, items, services, donations, loans, or a combination thereof to the health center entity pursuant to a contract, lease, grant, loan, or other agreement, if that agreement contributes to the ability of the health center entity to maintain or increase the availability, or enhance the quality, of services provided to a medically underserved population served by the health center, shall be permitted only to the extent sanctioned or permitted by federal law.
(d) Except as provided in Chapter 2.3 (commencing with Section 1400) of Division 2 of the Health and Safety Code and in Sections 654.1 and 654.2 of this code, it shall not be unlawful for any
person licensed under this division to refer a person to any laboratory, pharmacy, clinic (including entities exempt from licensure pursuant to Section 1206 of the Health and Safety Code), or health care facility solely because the licensee has a proprietary interest or coownership in the laboratory, pharmacy, clinic, or health care facility, provided, however, that the licensee’s return on investment for that proprietary interest or coownership shall be based upon the amount of the capital investment or proportional ownership of the licensee which ownership interest is not based on the number or value of any patients referred. Any referral excepted under this section shall be unlawful if the prosecutor proves that there was no valid medical need for the referral.

(e) Except as provided in Chapter 2.3 (commencing with Section 1400) of Division 2 of the Health and Safety Code and in Sections 654.1 and 654.2 of this code, it shall not be unlawful to provide nonmonetary remuneration, in the form of hardware, software, or information technology and training services, as described in subsections (x) and (y) of Section 1001.952 of Title 42 of the Code of Federal Regulations, as amended October 4, 2007, as published in the Federal Register (72 Fed. Reg. 56632 and 56644), and subsequently amended versions.

(f) “Health care facility” means a general acute care hospital, acute psychiatric hospital, skilled nursing facility, intermediate care facility, and any other health facility licensed by the State Department of Public Health under Chapter 2 (commencing with Section 1250) of Division 2 of the Health and Safety Code.

(g) Notwithstanding the other subdivisions of this section or any other provision of law, the payment or receipt of consideration for advertising, wherein a licensee offers or sells services through a third-party advertiser, shall not constitute a referral of patients when the third-party advertiser does not itself recommend, endorse, or otherwise select a licensee. The fee paid to the third-party advertiser shall be commensurate with the service provided by the third-party advertiser. If the licensee determines, after consultation with the purchaser of the service, that the service provided by the licensee is not appropriate for the purchaser or if the purchaser elects not to receive the service for any reason and requests a refund, the purchaser shall receive a refund of the full purchase price as determined by the terms of the advertising service agreement between the third-party advertiser and the licensee. The licensee shall disclose in the advertisement that a consultation is required and that the purchaser will receive a refund if not eligible to receive the service. This subdivision shall not apply to basic health care services, as defined in subdivision (b) of Section 1345 of the Health and Safety Code, or essential health benefits, as defined in Section 1367.005 of the Health and Safety Code and Section 10112.27 of the Insurance Code. The entity that provides the advertising shall be able to demonstrate that the licensee consented in writing to the requirements of this subdivision. A third-party advertiser shall make available to prospective purchasers advertisements for services of all licensees then advertising through the third-party advertiser in the applicable geographic region. In any advertisement offering a discount price for a service, the licensee shall also disclose the regular, non-discounted price for that service.

(h) A violation of this section is a public offense and is punishable upon a first conviction by imprisonment in a county jail for not more than one year, or by imprisonment pursuant to subdivision (h) of Section 1170 of the Penal Code, or by a fine not exceeding fifty thousand dollars ($50,000), or by both that imprisonment and fine. A second or subsequent conviction is punishable by imprisonment pursuant to subdivision (h) of Section 1170 of the Penal Code, or by that imprisonment and a fine of fifty thousand dollars ($50,000).
§650.01. Unlawful Referrals; Definitions

(a) Notwithstanding Section 650, or any other provision of law, it is unlawful for a licensee to refer a person for laboratory, diagnostic nuclear medicine, radiation oncology, physical therapy, physical rehabilitation, psychometric testing, home infusion therapy, or diagnostic imaging goods or services if the licensee or his or her immediate family has a financial interest with the person or in the entity that receives the referral.

(b) For purposes of this section and Section 650.02, the following shall apply:

(1) “Diagnostic imaging” includes, but is not limited to, all X-ray, computed axial tomography, magnetic resonance imaging nuclear medicine, positron emission tomography, mammography, and ultrasound goods and services.

(2) A “financial interest” includes, but is not limited to, any type of ownership interest, debt, loan, lease, compensation, remuneration, discount, rebate, refund, dividend, distribution, subsidy, or other form of direct or indirect payment, whether in money or otherwise, between a licensee and a person or entity to whom the licensee refers a person for a good or service specified in subdivision (a). A financial interest also exists if there is an indirect financial relationship between a licensee and the referral recipient including, but not limited to, an arrangement whereby a licensee has an ownership interest in an entity that leases property to the referral recipient. Any financial interest transferred by a licensee to any person or entity or otherwise established in any person or entity for the purpose of avoiding the prohibition of this section shall be deemed a financial interest of the licensee. For purposes of this paragraph, “direct or indirect payment” shall not include a royalty or consulting fee received by a physician and surgeon who has completed a recognized residency training program in orthopedics from a manufacturer or distributor as a result of his or her research and development of medical devices and techniques for that manufacturer or distributor. For purposes of this paragraph, “consulting fees” means those fees paid by the manufacturer or distributor to a physician and surgeon who has completed a recognized residency training program in orthopedics only for his or her ongoing services in making refinements to his or her medical devices or techniques marketed or distributed by the manufacturer or distributor, if the manufacturer or distributor does not own or control the facility to which the physician is referring the patient. A “financial interest” shall not include the receipt of capitation payments or other fixed amounts that are prepaid in exchange for a promise of a licensee to provide specified health care services to specified beneficiaries. A “financial interest” shall not include the receipt of remuneration by a medical director of a hospice, as defined in Section 1746 of the Health and Safety Code, for specified services if the arrangement is set out in writing, and specifies all services to be provided by the medical director, the term of the arrangement is for at least one year, and the compensation to be paid over the term of the arrangement is set in advance, does not exceed fair market value, and is not determined in a manner that takes into account the volume or value of any referrals or other business generated between parties.

(3) For the purposes of this section, “immediate family” includes the spouse and children of the licensee, the parents of the licensee, and the spouses of the children of the licensee.

(4) “Licensee” means a physician as defined in Section 3209.3 of the Labor Code.

(5) “Licensee’s office” means either of the following:
(A) An office of a licensee in solo practice.

(B) An office in which services or goods are personally provided by the licensee or by employees in that office, or personally by independent contractors in that office, in accordance with other provisions of law. Employees and independent contractors shall be licensed or certified when licensure or certification is required by law.

(6) “Office of a group practice” means an office or offices in which two or more licensees are legally organized as a partnership, professional corporation, or not-for-profit corporation, licensed pursuant to subdivision (a) of Section 1204 of the Health and Safety Code, for which all of the following apply:

(A) Each licensee who is a member of the group provides substantially the full range of services that the licensee routinely provides, including medical care, consultation, diagnosis, or treatment through the joint use of shared office space, facilities, equipment, and personnel.

(B) Substantially all of the services of the licensees who are members of the group are provided through the group and are billed in the name of the group and amounts so received are treated as receipts of the group, except in the case of a multispecialty clinic, as defined in subdivision (l) of Section 1206 of the Health and Safety Code, physician services are billed in the name of the multispecialty clinic and amounts so received are treated as receipts of the multispecialty clinic.

(C) The overhead expenses of, and the income from, the practice are distributed in accordance with methods previously determined by members of the group.

(c) It is unlawful for a licensee to enter into an arrangement or scheme, such as a cross-referral arrangement, that the licensee knows, or should know, has a principal purpose of ensuring referrals by the licensee to a particular entity that, if the licensee directly made referrals to that entity, would be in violation of this section.

(d) No claim for payment shall be presented by an entity to any individual, third party payer, or other entity for a good or service furnished pursuant to a referral prohibited under this section.

(e) No insurer, self-insurer, or other payer shall pay a charge or lien for any good or service resulting from a referral in violation of this section.

(f) A licensee who refers a person to, or seeks consultation from, an organization in which the licensee has a financial interest, other than as prohibited by subdivision (a), shall disclose the financial interest to the patient, or the parent or legal guardian of the patient, in writing, at the time of the referral or request for consultation.

(1) If a referral, billing, or other solicitation is between one or more licensees who contract with a multispecialty clinic pursuant to subdivision (l) of Section 1206 of the Health and Safety Code or who conduct their practice as members of the same professional corporation or partnership, and the services are rendered on the same physical premises, or under the same professional corporation or partnership name, the requirements of this subdivision may be met by posting a conspicuous disclosure statement at the registration area or by providing a patient with a written disclosure statement.

(2) If a licensee is under contract with the Department of Corrections or the California Youth Authority, and the patient is an inmate or parolee of either respective department, the requirements of this subdivision shall be satisfied by disclosing financial interests to either the Department of Corrections or the California Youth Authority.

(g) A violation of subdivision (a) shall be a misdemeanor. The Medical Board of California shall review the facts and circumstances of any conviction pursuant to subdivision (a) and take
appropriate disciplinary action if the licensee has committed unprofessional conduct. Violations of this section may also be subject to civil penalties of up to five thousand dollars ($5,000) for each offense, which may be enforced by the Insurance Commissioner, Attorney General, or a district attorney. A violation of subdivision (c), (d), or (e) is a public offense and is punishable upon conviction by a fine not exceeding fifteen thousand dollars ($15,000) for each violation and appropriate disciplinary action, including revocation of professional licensure, by the Medical Board of California or other appropriate governmental agency.

(h) This section shall not apply to referrals for services that are described in and covered by Sections 139.3 and 139.31 of the Labor Code.

(i) This section shall become operative on January 1, 1995.

(Amended by Stats. 1996, Ch. 817, Sec. 1. Effective January 1, 1997.)

§650.02. Exceptions to Referral Prohibition
The prohibition of Section 650.01 shall not apply to or restrict any of the following:

(a) A licensee may refer a patient for a good or service otherwise prohibited by subdivision (a) of Section 650.01 if the licensee’s regular practice is located where there is no alternative provider of the service within either 25 miles or 40 minutes traveling time, via the shortest route on a paved road. If an alternative provider commences furnishing the good or service for which a patient was referred pursuant to this subdivision, the licensee shall cease referrals under this subdivision within six months of the time at which the licensee knew or should have known that the alternative provider is furnishing the good or service. A licensee who refers to or seeks consultation from an organization in which the licensee has a financial interest under this subdivision shall disclose this interest to the patient or the patient’s parents or legal guardian in writing at the time of referral.

(b) A licensee, when the licensee or his or her immediate family has one or more of the following arrangements with another licensee, a person, or an entity, is not prohibited from referring a patient to the licensee, person, or entity because of the arrangement:

1. A loan between a licensee and the recipient of the referral, if the loan has commercially reasonable terms, bears interest at the prime rate or a higher rate that does not constitute usury, is adequately secured, and the loan terms are not affected by either party’s referral of any person or the volume of services provided by either party.

2. A lease of space or equipment between a licensee and the recipient of the referral, if the lease is written, has commercially reasonable terms, has a fixed periodic rent payment, has a term of one year or more, and the lease payments are not affected by either party’s referral of any person or the volume of services provided by either party.

3. Ownership of corporate investment securities, including shares, bonds, or other debt instruments that may be purchased on terms generally available to the public and that are traded on a licensed securities exchange or NASDAQ, do not base profit distributions or other transfers of value on the licensee’s referral of persons to the corporation, do not have a separate class or accounting for any persons or for any licensees who may refer persons to the corporation, and are in a corporation that had, at the end of the corporation’s most recent fiscal year, or on average during the previous three fiscal years, stockholder equity exceeding seventy-five million dollars ($75,000,000).
(4) Ownership of shares in a regulated investment company as defined in Section 851(a) of the federal Internal Revenue Code, if the company had, at the end of the company’s most recent fiscal year, or on average during the previous three fiscal years, total assets exceeding seventy-five million dollars ($75,000,000).

(5) A one-time sale or transfer of a practice or property or other financial interest between a licensee and the recipient of the referral if the sale or transfer is for commercially reasonable terms and the consideration is not affected by either party’s referral of any person or the volume of services provided by either party.

(6) A personal services arrangement between a licensee or an immediate family member of the licensee and the recipient of the referral if the arrangement meets all of the following requirements:
   (A) It is set out in writing and is signed by the parties.
   (B) It specifies all of the services to be provided by the licensee or an immediate family member of the licensee.
   (C) The aggregate services contracted for do not exceed those that are reasonable and necessary for the legitimate business purposes of the arrangement.
   (D) A person who is referred by a licensee or an immediate family member of the licensee is informed in writing of the personal services arrangement that includes information on where a person may go to file a complaint against the licensee or the immediate family member of the licensee.
   (E) The term of the arrangement is for at least one year.
   (F) The compensation to be paid over the term of the arrangement is set in advance, does not exceed fair market value, and is not determined in a manner that takes into account the volume or value of any referrals or other business generated between the parties.
   (G) The services to be performed under the arrangement do not involve the counseling or promotion of a business arrangement or other activity that violates any state or federal law.

(c) (1) A licensee may refer a person to a health facility, as defined in Section 1250 of the Health and Safety Code, or to any facility owned or leased by a health facility, if the recipient of the referral does not compensate the licensee for the patient referral, and any equipment lease arrangement between the licensee and the referral recipient complies with the requirements of paragraph (2) of subdivision (b).

(2) Nothing shall preclude this subdivision from applying to a licensee solely because the licensee has an ownership or leasehold interest in an entire health facility or an entity that owns or leases an entire health facility.

(3) A licensee may refer a person to a health facility for any service classified as an emergency under subdivision (a) or (b) of Section 1317.1 of the Health and Safety Code.

(4) A licensee may refer a person to any organization that owns or leases a health facility licensed pursuant to subdivision (a), (b), or (f) of Section 1250 of the Health and Safety Code if the licensee is not compensated for the patient referral, the licensee does not receive any payment from the recipient of the referral that is based or determined on the number or value of any patient referrals, and any equipment lease arrangement between the licensee and the referral recipient complies with the requirements of paragraph (2) of subdivision (b). For purposes of this paragraph, the ownership may be through stock or membership, and may be represented by a
parent holding company that solely owns or controls both the health facility organization and the affiliated organization.

(d) A licensee may refer a person to a nonprofit corporation that provides physician services pursuant to subdivision (l) of Section 1206 of the Health and Safety Code if the nonprofit corporation is controlled through membership by one or more health facilities or health facility systems and the amount of compensation or other transfer of funds from the health facility or nonprofit corporation to the licensee is fixed annually, except for adjustments caused by physicians joining or leaving the groups during the year, and is not based on the number of persons utilizing goods or services specified in Section 650.01.

(e) A licensee compensated or employed by a university may refer a person for a physician service, to any facility owned or operated by the university, or to another licensee employed by the university, provided that the facility or university does not compensate the referring licensee for the patient referral. In the case of a facility that is totally or partially owned by an entity other than the university, but that is staffed by university physicians, those physicians may not refer patients to the facility if the facility compensates the referring physicians for those referrals.

(f) The prohibition of Section 650.01 shall not apply to any service for a specific patient that is performed within, or goods that are supplied by, a licensee’s office, or the office of a group practice. Further, the provisions of Section 650.01 shall not alter, limit, or expand a licensee’s ability to deliver, or to direct or supervise the delivery of, in-office goods or services according to the laws, rules, and regulations governing his or her scope of practice.

(g) The prohibition of Section 650.01 shall not apply to cardiac rehabilitation services provided by a licensee or by a suitably trained individual under the direct or general supervision of a licensee, if the services are provided to patients meeting the criteria for Medicare reimbursement for the services.

(h) The prohibition of Section 650.01 shall not apply if a licensee is in the office of a group practice and refers a person for services or goods specified in Section 650.01 to a multispecialty clinic, as defined in subdivision (l) of Section 1206 of the Health and Safety Code.

(i) The prohibition of Section 650.01 shall not apply to health care services provided to an enrollee of a health care service plan licensed pursuant to the Knox-Keene Health Care Service Plan Act of 1975 (Chapter 2.2 (commencing with Section 1340) of Division 2 of the Health and Safety Code).

(j) The prohibition of Section 650.01 shall not apply to a request by a pathologist for clinical diagnostic laboratory tests and pathological examination services, a request by a radiologist for diagnostic radiology services, or a request by a radiation oncologist for radiation therapy if those services are furnished by, or under the supervision of, the pathologist, radiologist, or radiation oncologist pursuant to a consultation requested by another physician.

(k) This section shall not apply to referrals for services that are described in and covered by Sections 139.3 and 139.31 of the Labor Code.

(l) This section shall become operative on January 1, 1995.

(Amended by Stats. 2002, Ch. 309, Sec. 1. Effective January 1, 2003.)

§651. Dissemination of False or Misleading Information Concerning Professional Services or Products; Permissible Advertising

(a) It is unlawful for any person licensed under this division or under any initiative act referred to in this division to disseminate or cause to be disseminated any form of public communication
containing a false, fraudulent, misleading, or deceptive statement, claim, or image for the purpose of or likely to induce, directly or indirectly, the rendering of professional services or furnishing of products in connection with the professional practice or business for which he or she is licensed. A “public communication” as used in this section includes, but is not limited to, communication by means of mail, television, radio, motion picture, newspaper, book, list or directory of healing arts practitioners, Internet, or other electronic communication.

(b) A false, fraudulent, misleading, or deceptive statement, claim, or image includes a statement or claim that does any of the following:

(1) Contains a misrepresentation of fact.
(2) Is likely to mislead or deceive because of a failure to disclose material facts.
(3) (A) Is intended or is likely to create false or unjustified expectations of favorable results, including the use of any photograph or other image that does not accurately depict the results of the procedure being advertised or that has been altered in any manner from the image of the actual subject depicted in the photograph or image.

(B) Use of any photograph or other image of a model without clearly stating in a prominent location in easily readable type the fact that the photograph or image is of a model is a violation of subdivision (a). For purposes of this paragraph, a model is anyone other than an actual patient, who has undergone the procedure being advertised, of the licensee who is advertising for his or her services.

(C) Use of any photograph or other image of an actual patient that depicts or purports to depict the results of any procedure, or presents “before” and “after” views of a patient, without specifying in a prominent location in easily readable type size what procedures were performed on that patient is a violation of subdivision (a). Any “before” and “after” views (i) shall be comparable in presentation so that the results are not distorted by favorable poses, lighting, or other features of presentation, and (ii) shall contain a statement that the same “before” and “after” results may not occur for all patients.

(4) Relates to fees, other than a standard consultation fee or a range of fees for specific types of services, without fully and specifically disclosing all variables and other material factors.

(5) Contains other representations or implications that in reasonable probability will cause an ordinarily prudent person to misunderstand or be deceived.

(6) Makes a claim either of professional superiority or of performing services in a superior manner, unless that claim is relevant to the service being performed and can be substantiated with objective scientific evidence.

(7) Makes a scientific claim that cannot be substantiated by reliable, peer reviewed, published scientific studies.

(8) Includes any statement, endorsement, or testimonial that is likely to mislead or deceive because of a failure to disclose material facts.

(c) Any price advertisement shall be exact, without the use of phrases, including, but not limited to, “as low as,” “and up,” “lowest prices,” or words or phrases of similar import. Any advertisement that refers to services, or costs for services, and that uses words of comparison shall be based on verifiable data substantiating the comparison. Any person so advertising shall be prepared to provide information sufficient to establish the accuracy of that comparison. Price advertising shall not be fraudulent, deceitful, or misleading, including statements or advertisements of bait, discount, premiums, gifts, or any statements of a similar nature. In
connection with price advertising, the price for each product or service shall be clearly
identifiable. The price advertised for products shall include charges for any related professional
services, including dispensing and fitting services, unless the advertisement specifically and
clearly indicates otherwise.
(d) Any person so licensed shall not compensate or give anything of value to a representative of
the press, radio, television, or other communication medium in anticipation of, or in return for,
professional publicity unless the fact of compensation is made known in that publicity.
(e) Any person so licensed may not use any professional card, professional announcement card,
office sign, letterhead, telephone directory listing, medical list, medical directory listing, or a
similar professional notice or device if it includes a statement or claim that is false, fraudulent,
misleading, or deceptive within the meaning of subdivision (b).
(f) Any person so licensed who violates this section is guilty of a misdemeanor. A bona fide
mistake of fact shall be a defense to this subdivision, but only to this subdivision.
(g) Any violation of this section by a person so licensed shall constitute good cause for revocation
or suspension of his or her license or other disciplinary action.
(h) Advertising by any person so licensed may include the following:
(1) A statement of the name of the practitioner.
(2) A statement of addresses and telephone numbers of the offices maintained by the
practitioner.
(3) A statement of office hours regularly maintained by the practitioner.
(4) A statement of languages, other than English, fluently spoken by the practitioner or a person
in the practitioner’s office.
(5) (A) A statement that the practitioner is certified by a private or public board or agency or a
statement that the practitioner limits his or her practice to specific fields.
(B) A statement of certification by a practitioner licensed under Chapter 7 (commencing with
Section 3000) shall only include a statement that he or she is certified or eligible for certification
by a private or public board or parent association recognized by that practitioner’s licensing
board.
(C) A physician and surgeon licensed under Chapter 5 (commencing with Section 2000) by the
Medical Board of California may include a statement that he or she limits his or her practice to
specific fields, but shall not include a statement that he or she is certified or eligible for
certification by a private or public board or parent association, including, but not limited to, a
multidisciplinary board or association, unless that board or association is (i) an American Board
of Medical Specialties member board, (ii) a board or association with equivalent requirements
approved by that physician and surgeon’s licensing board, or (iii) a board or association with an
Accreditation Council for Graduate Medical Education approved postgraduate training program
that provides complete training in that specialty or subspecialty. A physician and surgeon licensed
under Chapter 5 (commencing with Section 2000) by the Medical Board of California who is
certified by an organization other than a board or association referred to in clause (i), (ii), or (iii)
shall not use the term “board certified” in reference to that certification, unless the physician
and surgeon is also licensed under Chapter 4 (commencing with Section 1600) and the use of the
term “board certified” in reference to that certification is in accordance with subparagraph (A).
A physician and surgeon licensed under Chapter 5 (commencing with Section 2000) by the
Medical Board of California who is certified by a board or association referred to in clause (i), (ii),
or (iii) shall not use the term “board certified” unless the full name of the certifying board is also used and given comparable prominence with the term “board certified” in the statement. For purposes of this subparagraph, a “multidisciplinary board or association” means an educational certifying body that has a psychometrically valid testing process, as determined by the Medical Board of California, for certifying medical doctors and other health care professionals that is based on the applicant’s education, training, and experience.

For purposes of the term “board certified,” as used in this subparagraph, the terms “board” and “association” mean an organization that is an American Board of Medical Specialties member board, an organization with equivalent requirements approved by a physician and surgeon’s licensing board, or an organization with an Accreditation Council for Graduate Medical Education approved postgraduate training program that provides complete training in a specialty or subspecialty.

The Medical Board of California shall adopt regulations to establish and collect a reasonable fee from each board or association applying for recognition pursuant to this subparagraph. The fee shall not exceed the cost of administering this subparagraph. Notwithstanding Section 2 of Chapter 1660 of the Statutes of 1990, this subparagraph shall become operative July 1, 1993.

However, an administrative agency or accrediting organization may take any action contemplated by this subparagraph relating to the establishment or approval of specialist requirements on and after January 1, 1991.

(D) A doctor of podiatric medicine licensed under Chapter 5 (commencing with Section 2000) by the Medical Board of California may include a statement that he or she is certified or eligible or qualified for certification by a private or public board or parent association, including, but not limited to, a multidisciplinary board or association, if that board or association meets one of the following requirements: (i) is approved by the Council on Podiatric Medical Education, (ii) is a board or association with equivalent requirements approved by the California Board of Podiatric Medicine, or (iii) is a board or association with the Council on Podiatric Medical Education approved postgraduate training program that provides training in podiatric medicine and podiatric surgery. A doctor of podiatric medicine licensed under Chapter 5 (commencing with Section 2000) by the Medical Board of California who is certified by a board or association referred to in clause (i), (ii), or (iii) shall not use the term “board certified” unless the full name of the certifying board is also used and given comparable prominence with the term “board certified” in the statement. A doctor of podiatric medicine licensed under Chapter 5 (commencing with Section 2000) by the Medical Board of California who is certified by an organization other than a board or association referred to in clause (i), (ii), or (iii) shall not use the term “board certified” in reference to that certification.

For purposes of this subparagraph, a “multidisciplinary board or association” means an educational certifying body that has a psychometrically valid testing process, as determined by the California Board of Podiatric Medicine, for certifying doctors of podiatric medicine that is based on the applicant’s education, training, and experience. For purposes of the term “board certified,” as used in this subparagraph, the terms “board” and “association” mean an organization that is a Council on Podiatric Medical Education approved board, an organization with equivalent requirements approved by the California Board of Podiatric Medicine, or an organization with a Council on Podiatric Medical Education approved postgraduate training program that provides training in podiatric medicine and podiatric surgery.
The California Board of Podiatric Medicine shall adopt regulations to establish and collect a reasonable fee from each board or association applying for recognition pursuant to this subparagraph, to be deposited in the State Treasury in the Podiatry Fund, pursuant to Section 2499. The fee shall not exceed the cost of administering this subparagraph.

(6) A statement that the practitioner provides services under a specified private or public insurance plan or health care plan.

(7) A statement of names of schools and postgraduate clinical training programs from which the practitioner has graduated, together with the degrees received.

(8) A statement of publications authored by the practitioner.

(9) A statement of teaching positions currently or formerly held by the practitioner, together with pertinent dates.

(10) A statement of his or her affiliations with hospitals or clinics.

(11) A statement of the charges or fees for services or commodities offered by the practitioner.

(12) A statement that the practitioner regularly accepts installment payments of fees.

(13) Otherwise lawful images of a practitioner, his or her physical facilities, or of a commodity to be advertised.

(14) A statement of the manufacturer, designer, style, make, trade name, brand name, color, size, or type of commodities advertised.

(15) An advertisement of a registered dispensing optician may include statements in addition to those specified in paragraphs (1) to (14), inclusive, provided that any statement shall not violate subdivision (a), (b), (c), or (e) or any other section of this code.

(16) A statement, or statements, providing public health information encouraging preventative or corrective care.

(17) Any other item of factual information that is not false, fraudulent, misleading, or likely to deceive.

(i) Each of the healing arts boards and examining committees within Division 2 shall adopt appropriate regulations to enforce this section in accordance with Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code. Each of the healing arts boards and committees and examining committees within Division 2 shall, by regulation, define those efficacious services to be advertised by businesses or professions under their jurisdiction for the purpose of determining whether advertisements are false or misleading. Until a definition for that service has been issued, no advertisement for that service shall be disseminated. However, if a definition of a service has not been issued by a board or committee within 120 days of receipt of a request from a licensee, all those holding the license may advertise the service. Those boards and committees shall adopt or modify regulations defining what services may be advertised, the manner in which defined services may be advertised, and restricting advertising that would promote the inappropriate or excessive use of health services or commodities. A board or committee shall not, by regulation, unreasonably prevent truthful, non-deceptive price or otherwise lawful forms of advertising of services or commodities, by either outright prohibition or imposition of onerous disclosure requirements. However, any member of a board or committee acting in good faith in the adoption or enforcement of any regulation shall be deemed to be acting as an agent of the state.

(j) The Attorney General shall commence legal proceedings in the appropriate forum to enjoin advertisements disseminated or about to be disseminated in violation of this section and seek
other appropriate relief to enforce this section. Notwithstanding any other provision of law, the costs of enforcing this section to the respective licensing boards or committees may be awarded against any licensee found to be in violation of any provision of this section. This shall not diminish the power of district attorneys, county counsels, or city attorneys pursuant to existing law to seek appropriate relief.

(k) A physician and surgeon or doctor of podiatric medicine licensed pursuant to Chapter 5 (commencing with Section 2000) by the Medical Board of California who knowingly and intentionally violates this section may be cited and assessed an administrative fine not to exceed ten thousand dollars ($10,000) per event. Section 125.9 shall govern the issuance of this citation and fine except that the fine limitations prescribed in paragraph (3) of subdivision (b) of Section 125.9 shall not apply to a fine under this subdivision.

(Amended by Stats. 2011, Ch. 385, Sec. 1. Effective January 1, 2012.)

§651.3. Health Care Service Plan Information and Advertising; Prohibition Against Contracting Entity Deriving Profit from Plan

(a) Any labor organization, bona fide employee group or bona fide employee association having contracted health care services from a health care service plan under the Knox-Keene Health Care Service Plan Act of 1975 (commencing with Section 1340 of the Health and Safety Code) may inform its members as to the benefits available and the charges therefor.

(b) Any new or revised written advertising or solicitation, or any form of evidence of coverage adopted by a health care service plan under the Knox-Keene Health Care Service Plan Act of 1975 (commencing with Section 1340 of the Health and Safety Code) for distribution to members pursuant to subdivision (a) shall comply with the provisions of the Knox-Keene Health Care Service Plan Act of 1975 and the regulations thereunder.

(c) Any labor organization, bona fide employee group or bona fide employee association, contracting for a health care service plan under this section, shall not derive any profit from such plan.

Nothing contained in this section shall be construed as authorizing a provider of medical assistance, including a prepaid health plan, under the Medi-Cal Act or the Waxman-Duffy Prepaid Health Plan Act to advertise in violation of any of the provisions of such acts and regulations developed thereto.

(Amended by Stats. 1981, Ch. 662, Sec. 1.)

§652. Violations by Licensees

Violation of this article in the case of a licensed person constitutes unprofessional conduct and grounds for suspension or revocation of his or her license by the board by whom he or she is licensed, or if a license has been issued in connection with a place of business, then for the suspension or revocation of the place of business in connection with which the violation occurs. The proceedings for suspension or revocation shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and each board shall have all the powers granted therein. However, in the case of a licensee of the State Department of Health Services, the proceedings shall be conducted in accordance with Section 110171 of the Health and Safety Code. In addition, any violation constitutes a misdemeanor as to any and all persons offering, delivering, receiving, accepting, or participating
in any rebate, refund, commission, preference, patronage dividend, unearned discount, or consideration, whether or not licensed under this division, and is punishable by imprisonment in the county jail not exceeding six months, by a fine not exceeding two thousand five hundred dollars ($2,500), or by both the imprisonment and fine.
(Amended by Stats. 1997, Ch. 220, Sec. 3. Effective August 4, 1997.)

§652.5. Violation of Article
Except as otherwise provided in this article, any violation of this article constitutes a misdemeanor as to any and all persons, whether or not licensed under this division, and is punishable by imprisonment in the county jail not exceeding six months, or by a fine not exceeding two thousand five hundred dollars ($2,500), or by both the imprisonment and fine.
(Amended by Stats. 1994, Ch. 1206, Sec. 6. Effective January 1, 1995.)

§653. “Person”
The word “person” as used in this article includes an individual, firm, partnership, association, corporation, limited liability company, or cooperative association.
(Amended by Stats. 1994, Ch. 1010, Sec. 3. Effective January 1, 1995.)

§654. Licensees’ Co-Ownership Arrangements
No person licensed under Chapter 5 (commencing with Section 2000) of this division may have any membership, proprietary interest or coownership in any form in or with any person licensed under Chapter 5.5 (commencing with Section 2550) of this division to whom patients, clients or customers are referred or any profit-sharing arrangements.
(Amended by Stats. 1979, Ch. 688.)

§654.2. Referrals to Organization in Which Licensee or Family Has Significant Beneficial Interest; Required Disclosure Statement
(a) It is unlawful for any person licensed under this division or under any initiative act referred to in this division to charge, bill, or otherwise solicit payment from a patient on behalf of, or refer a patient to, an organization in which the licensee, or the licensee’s immediate family, has a significant beneficial interest, unless the licensee first discloses in writing to the patient, that there is such an interest and advises the patient that the patient may choose any organization for the purpose of obtaining the services ordered or requested by the licensee.
(b) The disclosure requirements of subdivision (a) may be met by posting a conspicuous sign in an area which is likely to be seen by all patients who use the facility or by providing those patients with a written disclosure statement. Where referrals, billings, or other solicitations are between licensees who contract with multispecialty clinics pursuant to subdivision (l) of Section 1206 of the Health and Safety Code or who conduct their practice as members of the same professional corporation or partnership, and the services are rendered on the same physical premises, or under the same professional corporation or partnership name, the requirements of subdivision (a) may be met by posting a conspicuous disclosure statement at a single location which is a common area or registration area or by providing those patients with a written disclosure statement.
On and after July 1, 1987, persons licensed under this division or under any initiative act referred to in this division shall disclose in writing to any third-party payer for the patient, when requested by the payer, organizations in which the licensee, or any member of the licensee’s immediate family, has a significant beneficial interest and to which patients are referred. The third-party payer shall not request this information from the provider more than once a year. Nothing in this section shall be construed to serve as the sole basis for the denial or delay of payment of claims by third party payers.

(d) For the purposes of this section, the following terms have the following meanings:
(1) “Immediate family” includes the spouse and children of the licensee, the parents of the licensee and licensee’s spouse, and the spouses of the children of the licensee.
(2) “Significant beneficial interest” means any financial interest that is equal to or greater than the lesser of the following:
(A) Five percent of the whole.
(B) Five thousand dollars ($5,000).
(3) A third-party payer includes any health care service plan, self-insured employee welfare benefit plan, disability insurer, nonprofit hospital service plan, or private group or indemnification insurance program.
A third party payer does not include a prepaid capitated plan licensed under the Knox-Keene Health Care Service Plan Act of 1975 or Chapter 11a (commencing with Section 11491) of Part 2 of Division 2 of the Insurance Code.
(e) This section shall not apply to a “significant beneficial interest” which is limited to ownership of a building where the space is leased to the organization at the prevailing rate under a straight lease agreement or to any interest held in publicly traded stocks.
(f) (1) This section does not prohibit the acceptance of evaluation specimens for proficiency testing or referral of specimens or assignment from one clinical laboratory to another clinical laboratory, either licensed or exempt under this chapter, if the report indicates clearly the name of the laboratory performing the test.
(2) This section shall not apply to relationships governed by other provisions of this article nor is this section to be construed as permitting relationships or interests that are prohibited by existing law on the effective date of this section.
(3) The disclosure requirements of this section shall not be required to be given to any patient, customer, or his or her representative, if the licensee, organization, or entity is providing or arranging for health care services pursuant to a prepaid capitated contract with the State Department of Health Services.

§654.3. Medical Services Credit
(a) For purposes of this section, the following definitions shall apply:
(1) “Licensee” means an individual, firm, partnership, association, corporation, limited liability company, or cooperative association licensed under this division or under any initiative act or division referred to in this division.
(2) “Licensee’s office” means either of the following:
(A) An office of a licensee in solo practice.
An office in which services or goods are personally provided by the licensee or by employees in that office, or personally by independent contractors in that office, in accordance with law. Employees and independent contractors shall be licensed or certified when licensure or certification is required by law.

“Open-end credit” means credit extended by a creditor under a plan in which the creditor reasonably contemplates repeated transactions, the creditor may impose a finance charge from time to time on an outstanding unpaid balance, and the amount of credit that may be extended to the debtor during the term of the plan, up to any limit set by the creditor, is generally made available to the extent that any outstanding balance is repaid.

“Patient” includes, but is not limited to, the patient’s parent or other legal representative.

It is unlawful for a licensee, or employee or agent of that licensee, to charge treatment or costs to an open-end credit or loan, that is extended by a third party and that is arranged for, or established in, that licensee’s office, before the date upon which the treatment is rendered or costs are incurred, without first providing the patient with a treatment plan, as required by subdivision (e) and a list of which treatment and services are being charged in advance of rendering or incurring of costs.

A licensee shall, within 15 business days of a patient’s request, refund to the lender any payment received through credit or a loan extended by a third party that is arranged for, or established in, that licensee’s office for treatment that has not been rendered or costs that have not been incurred.

A licensee, or an employee or agent of that licensee, shall not arrange for or establish credit or a loan extended by a third party for a patient without first providing the following written or electronic notice, on one page or screen, respectively, in at least 14-point type, and obtaining a signature from the patient:

“Credit or Loan for Health Care Services
The attached application and information is for a credit card/line of credit or loan to help you finance your health care treatment. You should know that:
You are applying for a ____credit card/line of credit or a ____loan for $____.
You do not have to apply for the credit card/line of credit or loan. You may pay your health care provider for treatment in another manner.
This credit card/line of credit or loan is not a payment plan with the provider’s office; it is credit with, or a loan made by, [name of company issuing the credit card/line of credit or loan]. Your health care provider does not work for this company.
Before applying for this credit card/line of credit or loan, you have the right to a written treatment plan from your health care provider that includes the anticipated treatment to be provided and the estimated costs of each service.
If you are approved for a credit card/line of credit or loan, your health care provider can only charge treatment and laboratory costs to that credit card/line of credit or loan when you get the treatment or the health care provider incurs costs unless your health care provider has first given you a list of treatments that you are paying for in advance and the cost for each treatment or service.
You have the right to receive a credit to your credit card/line of credit or loan account refunded for any costs charged to the credit card/line of credit or loan for treatment that has not been
rendered or costs that your health care provider has not incurred. Your health care provider must refund the amount of the charges to the lender within 15 business days of your request, after which the lender will credit your account.

Please read carefully the terms and conditions of this credit card/line of credit or loan, including any promotional offers.

You may be required to pay interest rates on the amount charged to the credit card/line of credit or the amount of the loan. If you miss a payment or do not pay on time, you may have to pay a penalty on the entire cost of your procedure and a higher interest rate.

You may use this credit card/line of credit or loan for payments toward subsequent health care services.

If you do not pay the money that you owe the company that provides you with a credit card/line of credit or loan, your missed payments can appear on your credit report and could hurt your credit rating. You could also be sued.

[Patient’s Signature]”

(e) Prior to arranging for or establishing credit or a loan extended by a third party, a licensee shall give a patient a written treatment plan. The treatment plan shall include each anticipated service to be provided and the estimated cost of each service. If a patient is covered by a private or government medical benefit plan or medical insurance, from which the licensee takes assignment of benefits, the treatment plan shall indicate the patient’s private or government-estimated share of cost for each service. If the licensee does not take assignment of benefits from a patient’s medical benefit plan or insurance, the treatment plan shall indicate that the treatment may or may not be covered by a patient’s medical benefit or insurance plan, and that the patient has the right to confirm medical benefit or insurance information from the patient’s plan, insurer, or employer before beginning treatment.

(f) A licensee, or an employee or agent of that licensee, shall not arrange for or establish credit or a loan extended by a third party for a patient with whom the licensee, or an employee or agent of that licensee, communicates primarily in a language other than English that is one of the Medi-Cal threshold languages, unless the written notice information required by subdivision (d) is also provided in that language.

(g) A licensee, or an employee or agent of that licensee, shall not arrange for or establish credit or a loan that is extended by a third party for a patient who has been administered or is under the influence of general anesthesia, conscious sedation, or nitrous oxide.

(h) A patient who suffers any damage as a result of the use or employment by any person of a method, act, or practice that willfully violates this section may seek the relief provided by Chapter 4 (commencing with Section 1780) of Title 1.5 of Part 4 of Division 3 of the Civil Code.

(i) The rights, remedies, and penalties established by this article are cumulative, and shall not supersede the rights, remedies, or penalties established under other laws.

(Repealed and added by Stats. 2014, Ch. 256, Sec. 2. Effective January 1, 2015.)
Article 10.5. Unprofessional Conduct

§725. Excessive Prescribing or Treatment; Treatment for Intractable Pain
(a) Repeated acts of clearly excessive prescribing, furnishing, dispensing, or administering of drugs or treatment, repeated acts of clearly excessive use of diagnostic procedures, or repeated acts of clearly excessive use of diagnostic or treatment facilities as determined by the standard of the community of licensees is unprofessional conduct for a physician and surgeon, dentist, podiatrist, psychologist, physical therapist, chiropractor, optometrist, speech-language pathologist, or audiologist.
(b) Any person who engages in repeated acts of clearly excessive prescribing or administering of drugs or treatment is guilty of a misdemeanor and shall be punished by a fine of not less than one hundred dollars ($100) nor more than six hundred dollars ($600), or by imprisonment for a term of not less than 60 days nor more than 180 days, or by both that fine and imprisonment.
(c) A practitioner who has a medical basis for prescribing, furnishing, dispensing, or administering dangerous drugs or prescription controlled substances shall not be subject to disciplinary action or prosecution under this section.
(d) No physician and surgeon shall be subject to disciplinary action pursuant to this section for treating intractable pain in compliance with Section 2241.5.
(Amended by Stats. 2007, Ch. 130, Sec. 2. Effective January 1, 2008.)

§726. Commission of Act of Sexual Abuse or Misconduct with Patient or Client
(a) The commission of any act of sexual abuse, misconduct, or relations with a patient, client, or customer constitutes unprofessional conduct and grounds for disciplinary action for any person licensed under this division or under any initiative act referred to in this division.
(b) This section shall not apply to consensual sexual contact between a licensee and his or her spouse or person in an equivalent domestic relationship when that licensee provides medical treatment, other than psychotherapeutic treatment, to his or her spouse or person in an equivalent domestic relationship.
(Amended by Stats. 2015, Ch. 510, Sec. 3. Effective January 1, 2016.)

Article 12. Insurance Fraud

§810. Grounds for Disciplinary Action Against Health Care Professional
(a) It shall constitute unprofessional conduct and grounds for disciplinary action, including suspension or revocation of a license or certificate, for a health care professional to do any of the following in connection with his or her professional activities:
(1) Knowingly present or cause to be presented any false or fraudulent claim for the payment of a loss under a contract of insurance.
(2) Knowingly prepare, make, or subscribe any writing, with intent to present or use the same, or to allow it to be presented or used in support of any false or fraudulent claim.
(b) It shall constitute cause for revocation or suspension of a license or certificate for a health care professional to engage in any conduct prohibited under Section 1871.4 of the Insurance Code or Section 549 or 550 of the Penal Code.
(c) (1) It shall constitute cause for automatic suspension of a license or certificate issued pursuant to Chapter 4 (commencing with Section 1600), Chapter 5 (commencing with Section 2000), Chapter 6.6 (commencing with Section 2900), Chapter 7 (commencing with Section 3000), or Chapter 9 (commencing with Section 4000), or pursuant to the Chiropractic Act or the Osteopathic Act, if a licensee or certificate holder has been convicted of any felony involving fraud committed by the licensee or certificate holder in conjunction with providing benefits covered by worker's compensation insurance, or has been convicted of any felony involving Medi-Cal fraud committed by the licensee or certificate holder in conjunction with the Medi-Cal program, including the Denti-Cal element of the Medi-Cal program, pursuant to Chapter 7 (commencing with Section 14000), or Chapter 8 (commencing with Section 14200), of Part 3 of Division 9 of the Welfare and Institutions Code. The board shall convene a disciplinary hearing to determine whether or not the license or certificate shall be suspended, revoked, or some other disposition shall be considered, including, but not limited to, revocation with the opportunity to petition for reinstatement, suspension, or other limitations on the license or certificate as the board deems appropriate.

(2) It shall constitute cause for automatic suspension and for revocation of a license or certificate issued pursuant to Chapter 4 (commencing with Section 1600), Chapter 5 (commencing with Section 2000), Chapter 6.6 (commencing with Section 2900), Chapter 7 (commencing with Section 3000), or Chapter 9 (commencing with Section 4000), or pursuant to the Chiropractic Act or the Osteopathic Act, if a licensee or certificate holder has more than one conviction of any felony arising out of separate prosecutions involving fraud committed by the licensee or certificate holder in conjunction with providing benefits covered by worker's compensation insurance, or in conjunction with the Medi-Cal program, including the Denti-Cal element of the Medi-Cal program pursuant to Chapter 7 (commencing with Section 14000), or Chapter 8 (commencing with Section 14200), of Part 3 of Division 9 of the Welfare and Institutions Code. The board shall convene a disciplinary hearing to revoke the license or certificate and an order of revocation shall be issued unless the board finds mitigating circumstances to order some other disposition.

(3) It is the intent of the Legislature that paragraph (2) apply to a licensee or certificate holder who has one or more convictions prior to January 1, 2004, as provided in this subdivision.

(4) Nothing in this subdivision shall preclude a board from suspending or revoking a license or certificate pursuant to any other provision of law.

(5) “Board,” as used in this subdivision, means the Dental Board of California, the Medical Board of California, the Board of Psychology, the State Board of Optometry, the California State Board of Pharmacy, the Osteopathic Medical Board of California, and the State Board of Chiropractic Examiners.

(6) “More than one conviction,” as used in this subdivision, means that the licensee or certificate holder has one or more convictions prior to January 1, 2004, and at least one conviction on or after that date, or the licensee or certificate holder has two or more convictions on or after January 1, 2004. However, a licensee or certificate holder who has one or more convictions prior to January 1, 2004, but who has no convictions and is currently licensed or holds a certificate after that date, does not have “more than one conviction” for the purposes of this subdivision.
(d) As used in this section, health care professional means any person licensed or certified pursuant to this division, or licensed pursuant to the Osteopathic Initiative Act, or the Chiropractic Initiative Act.

(Amended by Stats. 2004, Ch. 333, Sec. 1. Effective January 1, 2005.)

CHAPTER 5. MEDICINE
Article 3: License Required and Exemptions

§2068. Nutritional Advice
This chapter shall not be construed to prohibit any person from providing nutritional advice or giving advice concerning proper nutrition. However, this section confers no authority to practice medicine or surgery or to undertake the prevention, treatment, or cure of disease, pain, injury, deformity, or physical or mental conditions or to state that any product might cure any disease, disorder, or condition in violation of any provision of law.

For purposes of this section the terms “providing nutritional advice or giving advice concerning proper nutrition” means the giving of information as to the use and role of food and food ingredients, including dietary supplements.

Any person in commercial practice providing nutritional advice or giving advice concerning proper nutrition shall post in an easily visible and prominent place the following statement in his or her place of business:

“NOTICE”

“State law allows any person to provide nutritional advice or give advice concerning proper nutrition—which is the giving of advice as to the role of food and food ingredients, including dietary supplements. This state law does NOT confer authority to practice medicine or to undertake the diagnosis, prevention, treatment, or cure of any disease, pain, deformity, injury, or physical or mental condition and specifically does not authorize any person other than one who is a licensed health practitioner to state that any product might cure any disease, disorder, or condition.”

The notice required by this section shall not be smaller than 8½ inches by 11 inches and shall be legibly printed with lettering no smaller than ½ inch in length, except the lettering of the word “NOTICE” shall not be smaller than 1 inch in length.

(Added by Stats. 1980, Ch. 1313, Sec. 2.)
CHAPTER 5.7. Physical Therapy
Article 1: Administration and General Provisions

§2600. Citation of Chapter
This chapter may be cited as the Physical Therapy Practice Act.
(Repealed and added by Stats. 1968, Ch. 1284.)

§2601. Definitions
For the purpose of this chapter, the following terms shall have the following meanings, unless otherwise specified:
(a) “Board” means the Physical Therapy Board of California.
(b) “Physical therapist” means a person who is licensed pursuant to this chapter to practice physical therapy.
(c) “Physical therapist assistant” means a person who is licensed pursuant to this chapter to assist in the provision of physical therapy under the supervision of a licensed physical therapist. “Physical therapy assistant” and “physical therapist assistant” shall be deemed identical and interchangeable terms.
(d) “Physical therapist technician” and “physical therapy aide,” as described in Section 2630.4, shall be deemed identical and interchangeable terms.
(e) “Physiotherapy” shall be synonymous with “physical therapy.”
(Repealed and added by Stats. 2013, Ch. 389, Sec. 4. Effective January 1, 2014.)

§2602. Enforcement and Administration of Chapter
The Physical Therapy Board of California, hereafter referred to as the board, shall enforce and administer this chapter.
This section shall remain in effect only until January 1, 2018, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2018, deletes or extends that date.
Notwithstanding any other provision of law, the repeal of this section renders the board subject to review by the appropriate policy committees of the Legislature.
(Amended by Stats. 2013, Ch. 389, Sec. 5. Effective January 1, 2014. Repealed as of January 1, 2018, by its own provisions.)

§2602.1. Priority to Protect the Public
Protection of the public shall be the highest priority for the Physical Therapy Board of California in exercising its licensing, regulatory, and disciplinary functions. Whenever the protection of the public is inconsistent with other interests sought to be promoted, the protection of the public shall be paramount.
(Added by Stats. 2002, Ch. 107, Sec. 9. Effective January 1, 2003.)

§2603. Members of the Board
The members of the board shall consist of four physical therapists, only one of whom shall be involved in physical therapy education, and three public members.
§2603.5. Physical Therapist and Public Board Members; Qualifications
(a) The physical therapist members of the board shall be appointed from persons having all of the following qualifications:
(1) Be a resident of California.
(2) Possess a valid and unrestricted license in California issued pursuant to this chapter.
(3) Have been licensed pursuant to this chapter and practicing in California for at least five years prior to appointment to the board.
(b) (1) The public members of the board shall have both of the following qualifications:
(A) Be appointed from persons having all of the qualifications as set forth in Chapter 6 (commencing with Section 450) of Division 1.
(B) Be a resident of California.
(2) No public member of the board shall be, nor have been, any of the following:
(A) An officer or faculty member of any college, school, or institution involved in physical therapy education.
(B) A licentiate of the Medical Board of California or of any board under this division or of any board referred to in Section 1000 or 3600.

(Added by Stats. 2013, Ch. 389, Sec. 7. Effective January 1, 2014.)

§2604. Appointment and Tenure of Members; Vacancies; Removal
The members of the board shall be appointed for a term of four years, expiring on the first day of June of each year.
The Governor shall appoint one of the public members and the four physical therapist members of the board qualified as provided in Sections 2603 and 2603.5. The Senate Committee on Rules and the Speaker of the Assembly shall each appoint a public member qualified as provided in Section 2603.5.
No person may serve as a member of the board for more than two consecutive terms. Vacancies shall be filled by appointment for the unexpired term. Annually, the board shall elect one of its members as president and one of its members as vice president.
The appointing power shall have the power to remove any member of the board from office for neglect of any duty required by law or for incompetency or unprofessional or dishonorable conduct.

(Amended by Stats. 2013, Ch. 389, Sec. 8. Effective January 1, 2014.)

§2605. Duties of Board
The board shall do all of the following:
(a) Evaluate the qualifications of applicants for licensure.
(b) Provide for the examinations of physical therapists and physical therapist assistants and establish a passing score for each examination.
(c) Issue all licenses for the practice of physical therapy in California. Except as otherwise required by the director pursuant to Section 164, the license issued by the board shall describe the licensee as a “physical therapist” or “physical therapist assistant” licensed by the Physical Therapy Board of California.
(d) Suspend and revoke licenses and otherwise enforce the provisions of this chapter.
(e) Administer a continuing competency program.
(f) Participate, as a member, in the Delegate Assembly, and in applicable committee meetings, of the Federation of State Boards of Physical Therapy.
(g) Publish, at least annually, a newsletter that includes, but is not limited to, actions taken by the board, disciplinary actions, and relevant statutory and regulatory changes.
(h) Provide for the timely orientation and training of new professional and public member appointees to the board directly related to board licensing and disciplinary functions and board rules, policies, and procedures.
(i) Adopt and administer a program of education in matters relevant to the regulation of physical therapy.

(Added by Stats. 2013, Ch. 389, Sec. 10. Effective January 1, 2014.)

§2606. Compensation of Members; Per Diem; Expenses
Each member of the board shall receive a per diem and expenses as provided in Section 103.
(Amended by Stats. 1996, Ch. 829, Sec. 9. Effective January 1, 1997.)

§2607. Employees; Contracts for Services Necessary for Enforcement of Chapter; Contracts with Consultants
The board may employ, subject to law, such clerical assistants and, except as provided in Section 159.5, other employees as it may deem necessary to carry out its powers and duties.
The board may enter into contracts for services necessary for enforcement of this chapter and may as necessary select and contract with physical therapy consultants who are licensed physical therapists to assist it in its programs on an intermittent basis. Notwithstanding any other provision of law, the board may contract with these consultants on a sole source basis. For the purposes of Division 3.6 (commencing with Section 810) of Title 1 of the Government Code, any consultant under contract with the board shall be considered a public employee.
(Amended by Stats. 2013, Ch. 389, Sec. 11. Effective January 1, 2014.)

§2607.5. Employment of Executive Officer, Investigators, Legal Counsel, Physical Therapist Consultants, and Other Assistance; Compensation; Services of Attorney General
(a) The board may employ an executive officer exempt from the provisions of the State Civil Service Act (Part 2 (commencing with Section 18500) of Division 5 of Title 2 of the Government Code) and may also employ investigators, legal counsel, physical therapist consultants, and other assistance as it may deem necessary to carry out this chapter. The board may fix the compensation to be paid for services and may incur other expenses as it may deem necessary. Investigators employed by the board shall be provided special training in investigating physical therapy practice activities.
(b) The Attorney General shall act as legal counsel for the board for any judicial and administrative proceedings and his or her services shall be a charge against it.
(c) This section shall remain in effect only until January 1, 2018, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2018, deletes or extends that date.
§2608. Proceedings for Denial, Suspension, Revocation, or Probationary Restriction of Licenses
The procedure in all matters and proceedings relating to the denial, suspension, revocation, or probationary restriction of licenses issued by the board under this chapter shall be governed by the provisions of Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.

§2608.5. Inspections of or Reports from Hospitals; Records of Patients
Each member of the board, or any licensed physical therapist appointed by the board, may inspect, or require reports from, a general or specialized hospital or any other facility providing physical therapy care, treatment or services and the physical therapy staff thereof, with respect to the physical therapy care, treatment, services, or facilities provided therein, and may inspect physical therapy patient records with respect to the care, treatment, services, or facilities. The authority to make inspections and to require reports as provided by this section shall not be delegated by a member of the board to any person other than a physical therapist and shall be subject to the restrictions against disclosure described in subdivision (u) of Section 2660.
(Amended by Stats. 2013, Ch. 389, Sec. 13. Effective January 1, 2014.)

§2611. Meetings; Time and Place; Quorum
The board shall meet at least three times each calendar year, meeting at least once each calendar year in northern California and once each calendar year in southern California. The board may convene from time to time until its business is concluded. Special meetings of the board may be held at any time and place as the board may designate. Four members of the board shall constitute a quorum for the transaction of business.
(Amended by Stats. 2013, Ch. 389, Sec. 16. Effective January 1, 2014.)

§2612. Compliance with Bagley-Keene Open Meeting Act
The board shall comply with the Bagley-Keene Open Meeting Act (Article 9 (commencing with Section 11120) of Chapter 1 of Part 1 of Division 3 of Title 2 of the Government Code).
(Amended by Stats. 2013, Ch. 389, Sec. 17. Effective January 1, 2014.)

§2613. Commissioner of Examination; Appointment
The board may appoint qualified persons to give the whole or any portion of any examination as provided in this chapter, who shall be designated as a commissioner on examination. A commissioner on examination need not be a member of the board but shall be subject to the same rules and regulations and shall be entitled to the same fee as if he or she were a member of the board.
(Amended by Stats. 1996, Ch. 829, Sec. 16. Effective January 1, 1997.)
§2614. Hearings; Law Governing; Decision
The board shall hear all matters, including, but not limited to, any contested case or any petition for reinstatement, restoration, or modification of probation. Except as otherwise provided in this chapter, all hearings shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code. If a contested case is heard by the board the hearing officer who presided at the hearing shall be present during the board’s consideration of the case and, if requested, shall assist and advise the board. The board shall issue its decision pursuant to Section 11517 of the Government Code.
(Amended by Stats. 2013, Ch. 389, Sec. 18. Effective January 1, 2014.)

§2615. Adoption of Regulations
The board shall adopt those regulations as may be necessary to effectuate this chapter. In adopting regulations the board shall comply with Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code.
(Amended by Stats. 2013, Ch. 389, Sec. 19. Effective January 1, 2014.)

Article 2: Scope of Regulation and Exemptions

§2620. Physical Therapy Defined and Restricted
(a) Physical therapy means the art and science of physical or corrective rehabilitation or of physical or corrective treatment of any bodily or mental condition of any person by the use of the physical, chemical, and other properties of heat, light, water, electricity, sound, massage, and active, passive, and resistive exercise, and shall include physical therapy evaluation, treatment planning, instruction and consultative services. The practice of physical therapy includes the promotion and maintenance of physical fitness to enhance the bodily movement related health and wellness of individuals through the use of physical therapy interventions. The use of roentgen rays and radioactive materials, for diagnostic and therapeutic purposes, and the use of electricity for surgical purposes, including cauterization, are not authorized under the term “physical therapy” as used in this chapter, and a license issued pursuant to this chapter does not authorize the diagnosis of disease.
(b) Nothing in this section shall be construed to restrict or prohibit other healing arts practitioners licensed or registered under this division from practice within the scope of their license or registration.
(Amended by Stats. 2004, Ch. 117, Sec. 1. Effective January 1, 2005.)

§2620.1. Direct Physical Therapy Treatment Services
(a) In addition to receiving those services authorized by Section 2620, a person may initiate physical therapy treatment directly from a licensed physical therapist if the treatment is within the scope of practice of physical therapists, as defined in Section 2620, and all of the following conditions are met:
(1) If, at any time, the physical therapist has reason to believe that the patient has signs or symptoms of a condition that requires treatment beyond the scope of practice of a physical therapist or the patient is not progressing toward documented treatment goals as demonstrated by objective, measurable, or functional improvement, the physical therapist shall refer the
patient to a person holding a physician and surgeon’s certificate issued by the Medical Board of California or by the Osteopathic Medical Board of California or to a person licensed to practice dentistry, podiatric medicine, or chiropractic.

(2) The physical therapist shall comply with Section 2633, and shall disclose to the patient any financial interest he or she has in treating the patient and, if working in a physical therapy corporation, shall comply with Article 6 (commencing with Section 650) of Chapter 1.

(3) With the patient’s written authorization, the physical therapist shall notify the patient’s physician and surgeon, if any, that the physical therapist is treating the patient.

(4) The physical therapist shall not continue treating the patient beyond 45 calendar days or 12 visits, whichever occurs first, without receiving, from a person holding a physician and surgeon’s certificate from the Medical Board of California or the Osteopathic Medical Board of California or from a person holding a certificate to practice podiatric medicine from the California Board of Podiatric Medicine and acting within his or her scope of practice, a dated signature on the physical therapist’s plan of care indicating approval of the physical therapist’s plan of care. Approval of the physical therapist’s plan of care shall include an in-person patient examination and evaluation of the patient’s condition and, if indicated, testing by the physician and surgeon or podiatrist.

(b) The conditions in paragraph (4) of subdivision (a) do not apply to a physical therapist when he or she is only providing wellness physical therapy services to a patient as described in subdivision (a) of Section 2620.

(c) (1) This section does not expand or modify the scope of practice for physical therapists set forth in Section 2620, including the prohibition on a physical therapist diagnosing a disease.

(2) This section does not restrict or alter the scope of practice of any other health care professional.

(d) Nothing in this section shall be construed to require a health care service plan, insurer, workers’ compensation insurance plan, employer, or state program to provide coverage for direct access to treatment by a physical therapist.

(e) When a person initiates physical therapy treatment services directly, pursuant to this section, the physical therapist shall not perform physical therapy treatment services without first providing the following notice to the patient, orally and in writing, in at least 14-point type and signed by the patient:

“Direct Physical Therapy Treatment Services

You are receiving direct physical therapy treatment services from an individual who is a physical therapist licensed by the Physical Therapy Board of California. Under California law, you may continue to receive direct physical therapy treatment services for a period of up to 45 calendar days or 12 visits, whichever occurs first, after which time a physical therapist may continue providing you with physical therapy treatment services only after receiving, from a person holding a physician and surgeon’s certificate issued by the Medical Board of California or by the Osteopathic Medical Board of California, or from a person holding a certificate to practice podiatric medicine from the California Board of Podiatric Medicine and acting within his or her scope of practice, a dated signature on the physical therapist’s plan of care.”
care indicating approval of the physical therapist’s plan of care and that an in-person patient examination and evaluation was conducted by the physician and surgeon or podiatrist.

Patient’s Signature/Date”

(Added by Stats. 2013, Ch. 620, Sec. 4. Effective January 1, 2014.)

§2620.3. Topical Medication

A physical therapist licensed pursuant to this chapter may apply topical medications as part of the practice of physical therapy as defined in Section 2620 if he or she complies with regulations duly adopted by the board pursuant to this section and the Administrative Procedure Act. The board shall adopt regulations implementing this section after meeting and conferring with the Medical Board of California and the California State Board of Pharmacy specifying those topical medications applicable to the practice of physical therapy and protocols for their use. Nothing in this section shall be construed to authorize a physical therapist to prescribe medications.

(Amended by Stats. 1996, Ch. 829, Sec. 19. Effective January 1, 1997.)

§2620.5. Tissue Penetration

A physical therapist may, upon specified authorization of a physician and surgeon, perform tissue penetration for the purpose of evaluating neuromuscular performance as a part of the practice of physical therapy, as defined in Section 2620, provided the physical therapist is certified by the board to perform the tissue penetration and evaluation and provided the physical therapist does not develop or make diagnostic or prognostic interpretations of the data obtained. Any physical therapist who develops or makes a diagnostic or prognostic interpretation of this data is in violation of the Medical Practice Act (Chapter 5 (commencing with Section 2000) of Division 2), and may be subject to all of the sanctions and penalties set forth in that act.

The board, after meeting and conferring with the Division of Licensing of the Medical Board of California, shall do all of the following:

(a) Adopt standards and procedures for tissue penetration for the purpose of evaluating neuromuscular performance by certified physical therapists.

(b) Establish standards for physical therapists to perform tissue penetration for the purpose of evaluating neuromuscular performance.

(c) Certify physical therapists meeting standards established by the board pursuant to this section.

(Added by Stats. 2000, Ch. 427, Sec. 1. Effective January 1, 2001.)

§2620.7. Documentation and Maintenance of Patient Records

(a) Patient records shall be documented as required in regulations promulgated by the board.

(b) Patient records shall be maintained for a period of no less than seven years following the discharge of the patient, except that the records of unemancipated minors shall be maintained at least one year after the minor has reached 18 years of age, and not in any case less than seven years.

(Amended by Stats. 2013, Ch. 389, Sec. 21. Effective January 1, 2014.)
§2621. Practice of Medicine, Surgery, or Healing as Authorized by §2620
Nothing in this chapter shall be construed as authorizing a physical therapist to practice medicine, surgery, or any other form of healing except as authorized by Section 2620.
(Repealed and added by Stats. 1968, Ch. 1284.)

§2622. Management of Patient Care; Physical Therapist Assistants Services of Aide
(a) A physical therapist shall be responsible for managing all aspects of the care of each patient as set forth in regulations promulgated by the board.
(b) A physical therapist shall not supervise more than two physical therapist assistants at one time to assist the physical therapist in his or her practice of physical therapy.
(c) A physical therapist may utilize the services of one aide engaged in patient-related tasks to aid the physical therapist in his or her practice of physical therapy.
(Repealed and added by Stats. 2013, Ch. 389, Sec. 23. Effective January 1, 2014.)

§2623. Professional Conduct Rules; Rules and Standards
The board may, by regulation, prescribe, amend, or repeal any rules contained within a code of professional conduct appropriate to the establishment and maintenance of integrity and dignity in the profession of physical therapy. Every licensee of the board shall be governed and controlled by the rules and standards adopted by the board.
(Added by Stats. 2013, Ch. 389, Sec. 24. Effective January 1, 2014.)

§2630. Necessity of Physical Therapist License
It is unlawful for any person or persons to practice, or offer to practice, physical therapy in this state for compensation received or expected, or to hold himself or herself out as a physical therapist, unless at the time of so doing the person holds a valid, unexpired, and unrevoked physical therapist license issued under this chapter, except as authorized by subdivisions (c), (d), (e), and (g) of Section 2630.5.
(Amended by Stats. 2013, Ch. 389, Sec. 26. Effective January 1, 2014.)

§2630.3. Physical Therapist Assistants; Requirements
(a) A licensed physical therapist assistant holding a valid, unexpired, and unrevoked physical therapist assistant license may assist in the provision of physical therapy services only under the supervision of a physical therapist licensed by the board. A licensed physical therapist shall at all times be responsible for the extent, kind, quality, and documentation of all physical therapy services provided by the physical therapist assistant.
(b) It is unlawful for any person or persons to hold himself or herself out as a physical therapist assistant, unless at the time of so doing the person holds a valid, unexpired, and unrevoked physical therapist assistant license issued under this chapter, except as authorized in subdivisions (f) and (g) of Section 2630.5.
(c) Physical therapist assistants shall not be independently supervised by a physical therapist license applicant, as defined in Section 2639, or a physical therapist student, as defined in Section 2633.7.
(d) A physical therapist assistant shall not perform any evaluation of a patient or prepare a discharge summary. The supervising physical therapist shall determine which elements of the
treatment plan, if any, shall be assigned to the physical therapist assistant. Assignment of patient care shall be commensurate with the competence of the physical therapist assistant. 
(Added by Stats. 2013, Ch. 389, Sec. 27. Effective January 1, 2014.)

§2630.4. Physical Therapy Aides; Requirements
(a) A “physical therapy aide” is an unlicensed person, at least 18 years of age, who aids a licensed physical therapist consistent with subdivision (b).
(b) The aide shall at all times be under the supervision of the physical therapist. An aide shall not independently perform physical therapy or any physical therapy procedure. The board shall adopt regulations that set forth the standards and requirements for the supervision of an aide by a physical therapist.
(c) Physical therapy aides shall not be independently supervised by a physical therapist license applicant, as defined in Section 2639, or a physical therapist student, as defined in Section 2633.7.
(d) This section does not prohibit the administration by a physical therapy aide of massage, external baths, or normal exercise not a part of a physical therapy treatment. 
(Added by Stats. 2013, Ch. 389, Sec. 28. Effective January 1, 2014.)

§2630.5. Persons Exempt from Licensure Requirements
The following persons are exempt from the licensure requirements of this chapter when engaged in the following activities:
(a) A regularly matriculated physical therapist student undertaking a course of professional instruction in an approved entry-level physical therapy education program or enrolled in a program of supervised clinical education under the direction of an approved physical therapy education program as described in Section 2651. These physical therapist students may perform physical therapy as a part of their course of study.
(b) A regularly matriculated physical therapist assistant student undertaking a course of instruction in an approved physical therapy education program or enrolled in a program of supervised clinical education under the direction of an approved physical therapy education program as described in Section 2651. These physical therapist assistant students may perform physical therapy techniques as a part of their course of study.
(c) A physical therapist who holds a valid and unrestricted license in another jurisdiction of the United States or who is credentialed to practice physical therapy in another country if that person is researching, demonstrating, or providing physical therapy in connection with teaching or participating in an educational seminar of no more than 60 days in a calendar year.
(d) A physical therapist located outside this state, when in actual consultation, whether within this state or across state lines, with a licensed physical therapist of this state, or when he or she is an invited guest of the American Physical Therapy Association or one of its components, or an invited guest of an approved physical therapy school or college for the sole purpose of engaging in professional education through lectures, clinics, or demonstrations, if, at the time of the consultation, lecture, or demonstration, he or she holds a valid and unrestricted physical therapist license in the state or country in which he or she resides. The physical therapist shall not open an office, appoint a place to meet patients, receive calls from patients within the limits of this state, give orders, or have ultimate authority over the care of a physical therapy patient who is located within this state.
(e) A physical therapist who holds a valid and unrestricted license in another jurisdiction of the United States or credentialed to practice physical therapy in another country if that person, by contract or employment, is providing physical therapy to individuals affiliated with or employed by established athletic teams, athletic organizations, or performing arts companies temporarily practicing, competing, or performing in the state for no more than 60 days in a calendar year.

(f) A physical therapist assistant who holds a valid and unrestricted license in another jurisdiction of the United States and is assisting a physical therapist engaged in activities described in subdivision (c), (d), or (e).

(g) A physical therapist or physical therapist assistant who has a valid and unrestricted license in a jurisdiction of the United States who is forced to leave his or her residence in a state other than California due to a governmentally declared emergency. This exemption applies for no more than 60 days following the declaration of the emergency. In order to be eligible for this exemption, the physical therapist or physical therapist assistant shall notify the board of his or her intent to practice in this state and provide a valid mailing address, telephone number, and email address. 

(Added by Stats. 2013, Ch. 389, Sec. 29. Effective January 1, 2014.)

§2633. Title of Licensed Physical Therapist; Use of Doctoral Degree

(a) A person holding a license as a physical therapist issued by the board may use the title “physical therapist” or the letters “P.T.” or any other words, letters, or figures that indicate that the person using same is a licensed physical therapist. No other person shall be so designated or shall use the term licensed or registered physical therapist, licensed or registered physiotherapist, licensed or registered physical therapy technician, or the letters “L.P.T.,” “R.P.T.,” or “P.T.”.

(b) A licensed physical therapist who has received a doctoral degree in physical therapy (DPT) or, after adoption of the regulations described in subdivision (d), a doctoral degree in a related health science may do the following:

(1) In a written communication, use the initials DPT, PhD, or EdD, as applicable, following the licensee’s name.

(2) In a written communication, use the title “Doctor” or the abbreviation “Dr.” preceding the licensee’s name, if the licensee’s name is immediately followed by an unabbreviated specification of the applicable doctoral degree held by the licensee.

(3) In a spoken communication while engaged in the practice of physical therapy, use the title “doctor” preceding the person’s name, if the speaker specifies that he or she is a physical therapist.

(c) A doctoral degree described in subdivision (b) shall be granted by an institution accredited by the Western Association of Schools and Colleges or by an accrediting agency recognized by the National Commission on Accrediting or the United States Department of Education that the board determines is equivalent to the Western Association of Schools and Colleges.

(d) The board shall define, by regulation, the doctoral degrees that are in a related health science for purposes of subdivision (b).

(Amended by Stats. 2006, Ch. 222, Sec. 1. Effective January 1, 2007.)
§2633.5. Use of Words, Letters, or Figures Indicating a Person is a Licensed Physical Therapist Assistant Prohibition on Use of Prefixes or Titles Implying Physical Therapist Assistant is a Physical Therapist or Doctor
(a) Only a person licensed as a physical therapist assistant by the board may use the title “physical therapist assistant” or “physical therapy assistant” or the letters “PTA” or any other words, letters, or figures that indicate that the person is a physical therapist assistant licensed pursuant to this chapter.
(b) The license of a physical therapist assistant shall not authorize the use of the prefix “LPT,” “RPT,” “PT,” or “Dr.,” or the title “physical therapist,” “therapist,” “doctor,” or any affix indicating or implying that the physical therapist assistant is a physical therapist or doctor.
(Added by Stats. 2013, Ch. 389, Sec. 31. Effective January 1, 2014.)

§2633.7. Identification as “Physical Therapist Student” or “Physical Therapist Assistant Student”
During a period of clinical practice described in Section 2650 or in any similar period of observation of related educational experience involving recipients of physical therapy, a person so engaged shall be identified only as a “physical therapist student” or a “physical therapist assistant student,” as authorized by the board in its regulations.
(Added by Stats. 2013, Ch. 389, Sec. 32. Effective January 1, 2014.)

§2634. Investigation of Applicants
The board may investigate each and every applicant for a license, before a license is issued, in order to determine whether or not the applicant has in fact the qualifications required by this chapter.
(Amended by Stats. 1996, Ch. 829, Sec. 24. Effective January 1, 1997.)

Article 3: Qualifications and Requirements for Licensure

§2635. Qualifications in General
Every applicant for a license under this chapter shall, at the time of application, be a person over 18 years of age, not addicted to alcohol or any controlled substance, have successfully completed the education and training required by Section 2650, and not have committed acts or crimes constituting grounds for denial of licensure under Section 480.
(Amended by Stats. 1994, Ch. 956, Sec. 6. Effective January 1, 1995.)

§2636. Examination
(a) Except as otherwise provided in this chapter, no person shall receive a license under this chapter without first successfully passing the following examinations, where success is determined based on the examination passing standard set by the board:
(1) An examination under the direction of the board to demonstrate the applicant’s knowledge of the laws and regulations related to the practice of physical therapy in California. The examination shall reasonably test the applicant’s knowledge of these laws and regulations.
(2) The physical therapy examination for the applicant’s licensure category. The examination for licensure as a physical therapist shall test entry-level competence to practice physical therapy.
The examination for licensure as a physical therapist assistant shall test entry-level competence to practice as a physical therapist assistant in the technical application of physical therapy services.

(b) An applicant may take the examinations for licensure as a physical therapist or for licensure as a physical therapist assistant after the applicant has met the educational requirements for that particular category of licensure.

(c) The examinations required by the board for a license under this chapter may be conducted by the board or by a public or private organization specified by the board. The examinations may be conducted under a uniform examination system and, for that purpose, the board may make arrangements with organizations furnishing examination materials as may, in its discretion, be desirable.

(Amended by Stats. 2013, Ch. 389, Sec. 34. Effective January 1, 2014.)

§2636.5. Exemption from Examination
(a) An applicant may be issued a license without a written examination if he or she meets all of the following:
(1) He or she is at the time of application licensed as a physical therapist or physical therapist assistant in a state, district, or territory of the United States having, in the opinion of the board, requirements for licensing equal to or higher than those in California, and he or she has passed, to the satisfaction of the board, an examination for licensing that is, in the opinion of the board, comparable to the examination used in this state.
(2) He or she is a graduate of a physical therapist or physical therapist assistant education program approved by the board, or has met the requirements of Section 2653.
(3) He or she files an application with the board and meets the requirements prescribed by Sections 2635 and 2650.

(b) An applicant for licensure under subdivision (a), whose application is based on a certificate issued by a physical therapy licensing authority of another state may be required to file a statement of past work activity.

(c) An applicant who has filed a physical therapy application under this section with the board for the first time may, between the date of receipt of notice that his or her application is on file and the date of receipt of his or her license, perform as a physical therapist or physical therapist assistant, as appropriate, under the supervision of a physical therapist licensed in this state. During this period the applicant shall identify himself or herself only as a “physical therapist license applicant” or “physical therapist assistant license applicant,” as appropriate.

If the applicant under this section does not qualify and receive a license as provided in this section and does not qualify under Section 2639, all privileges under this section shall terminate upon notice by the board. An applicant may only qualify once to perform as a physical therapist license applicant or physical therapist assistant license applicant.

(Amended by Stats. 2013, Ch. 389, Sec. 35. Effective January 1, 2014.)

§2638. Reexamination
Any applicant for licensure as a physical therapist or physical therapist assistant who fails to pass the examination required by the board may retake the licensing examination and shall pay the reexamination fee.
§2639. Practice by Applicant
(a) (1) Every graduate of an approved physical therapy education program who has filed a complete application, as defined in regulation, for licensure with the board and has been awarded either physical therapist license applicant status or physical therapist assistant license applicant status shall practice under the supervision of a licensed physical therapist pursuant to this chapter for no more than 120 days pending the results of the first licensing examination administered. If the applicant passes the examination, the physical therapist license applicant status or physical therapist assistant license applicant status shall remain in effect until a regular renewable license is issued, or licensure is denied, by the board. A supervising physical therapist shall document receipt of the letter authorizing the physical therapist license applicant status or physical therapist assistant license applicant status and record the expiration date of that status in the employee record. A supervising physical therapist shall require the applicant to provide documentation of the license issued at the conclusion of the physical therapist license applicant status or physical therapist assistant license applicant status. During this period the applicant shall identify himself or herself only as “physical therapist license applicant” or “physical therapist assistant license applicant,” as appropriate.
(2) A person shall not be considered a graduate unless he or she has successfully completed all the clinical training and internship required for graduation from the education program.
(b) A physical therapist license applicant who has been awarded license applicant status may perform as a physical therapist if he or she is under the supervision of a physical therapist licensed by the board. A physical therapist assistant license applicant who has been awarded license applicant status may perform as a physical therapist assistant if he or she is under the supervision of a physical therapist licensed by the board. The applicant shall comply with any requirements applicable to the license for which he or she applied. An applicant may not perform in those capacities if he or she fails the first examination attempt.

(Repealed and added by Stats. 2013, Ch. 389, Sec. 38. Effective January 1, 2014.)

§2639.1. Persons with Training or Experience; Application for Licensure as a Physical Therapist Assistant
A person having, in the opinion of the board, training or experience, or a combination of training and experience, equivalent to that obtained in an approved physical therapist assistant education program and who meets the requirements of Section 2635 may apply for licensure as a physical therapist assistant.

(Added by Stats. 2013, Ch. 389, Sec. 39. Effective January 1, 2014.)

Article 4: Renewal of Licenses

§2644. Expiration of Licensee; Renewal of Unexpired License
(a) Every license issued under this chapter shall expire at 12 a.m. on the last day of the birth month of the licensee during the second year of a two-year term, if not renewed.
(b) To renew an unexpired license, the licensee shall, on or before the date on which it would otherwise expire, apply for renewal on a form prescribed by the board, pay the prescribed
renewal fee, and submit proof of the completion of continuing competency required by the board pursuant to Section 2649. The licensee shall disclose on his or her license renewal application any misdemeanor or other criminal offense for which he or she has been found guilty or to which he or she has pleaded guilty or no contest.

(Added by Stats. 2013, Ch. 389, Sec. 41. Effective January 1, 2014.)

§2645. Notice Regarding Renewal
At least 60 days before the expiration of any license, the board shall mail to each licensee under this chapter, at the latest address furnished by the licensee to the board, a notice stating the amount of the renewal fee and the date on which it is due, and that failure to pay it on or before the due date shall result in expiration of the license.

(Added by Stats. 2013, Ch. 389, Sec. 41. Effective January 1, 2014.)

§2646. Renewal of Expired License
A license that has expired may be renewed at any time within five years after its expiration by applying for renewal as set forth in Section 2644. Renewal under this section shall be effective on the date on which the renewal application is filed, on the date on which the renewal fee or accrued renewal fees are paid, or on the date on which the delinquency fee and penalty fee, if any, are paid, whichever last occurs. A renewed license shall continue in effect through the expiration date set forth in Section 2644 that next occurs after the effective date of the renewal, at which time it shall expire and become invalid if it is not so renewed.

(Added by Stats. 2013, Ch. 389, Sec. 41. Effective January 1, 2014.)

§2647. Failure to Renew Within Five Years After Expiration; Prohibition on Reissuance; New License Application
A person who fails to renew his or her license within five years after its expiration may not renew it, and it shall not be reissued, reinstated, or restored thereafter. However, the person may apply for a new license if he or she satisfies the requirements set forth in Article 3 (commencing with Section 2635).

(Added by Stats. 2013, Ch. 389, Sec. 41. Effective January 1, 2014.)

§2648. Exemption from Renewal Fees; Military Training or Service
(a) A licensee is exempt from the payment of the renewal fee while engaged in full-time training or active service in the United States Army, Navy, Air Force, Marines, or Coast Guard, or in the United States Public Health Service.
(b) A person exempted from the payment of the renewal fee by this section shall not engage in any practice of, or assistance in the provision of, physical therapy not related to his or her military service and shall become liable for payment of the fee for the current renewal period upon his or her discharge from full-time active service and shall have a period of 60 days after becoming liable within which to pay the renewal fee before the delinquency fee is required. Any person who is discharged from active service within 60 days of the end of the renewal period is exempt from the payment of the renewal fee for that period.
(c) The time spent in full-time active service or training shall not be included in the computation of the five-year period for renewal and reinstatement of licensure provided in Section 2646.
(d) A person exempt from renewal fees under this section shall not be exempt from meeting the requirements of Section 2649.

(Added by Stats. 2013, Ch. 389, Sec. 41. Effective January 1, 2014.)

§2648.3. Waiver of Renewal Fee, Inability to Practice or Assist Due to Disability; Conditions Allowing Practice or Assistance to Resume
A licensee who demonstrates to the satisfaction of the board that he or she is unable to practice, or assist in the provision of, physical therapy due to a disability may request a waiver of the license renewal fee. The granting of a waiver shall be at the discretion of the board and may be terminated at any time. Waivers shall be based on the inability of a licensee to practice, or assist in the provision of, physical therapy. A licensee whose renewal fee has been waived pursuant to this section shall not engage in the practice of, or assist in the provision of, physical therapy unless and until the licensee pays the current renewal fee and does either of the following:
(a) Establishes to the satisfaction of the board, on a form prescribed by the board and signed under penalty of perjury, that the licensee’s disability either no longer exists or does not affect his or her ability to practice, or assist in the provision of, physical therapy safely.
(b) Signs an agreement, on a form prescribed by the board and signed under penalty of perjury, to limit his or her practice of, or assistance in the provision of, physical therapy in the manner prescribed by his or her reviewing physician.
(c) A person exempt from renewal fees under this section shall not be exempt from meeting the requirements of Section 2649.

(Added by Stats. 2013, Ch. 389, Sec. 41. Effective January 1, 2014.)

§2648.5. Waiver of Renewal Fee; Provision of Voluntary, Unpaid Physical Therapy Services
(a) The renewal fee shall be waived for licensees residing in California who certify to the board that license renewal is for the sole purpose of providing voluntary, unpaid physical therapy services.
(b) A person exempt from renewal fees under this section shall not be exempt from meeting the requirements of Section 2649.

(Added by Stats. 2013, Ch. 389, Sec. 41. Effective January 1, 2014.)

§2648.7. Retired License Status
A licensee is exempt from the payment of the renewal fee and from meeting the requirements set forth in Section 2649 if he or she has applied to the board for retired license status. A holder of a license in retired status pursuant to this section shall not engage in the practice of, or assist in the provision of, physical therapy unless the licensee applies for renewal and meets all of the requirements as set forth in Section 2644.

(Added by Stats. 2013, Ch. 389, Sec. 41. Effective January 1, 2014.)

§2649. Renewal of License; Proof of Completion of Required Continuing Education; Number of Hours; Regulations; Fees
(a) A person renewing his or her license shall submit proof satisfactory to the board that, during the preceding two years, he or she has completed the required number of continuing education hours established by regulation by the board, or such other proof of continuing competency as
the board may establish by regulation. Required continuing education shall not exceed 30 hours every two years.

(b) The board shall adopt and administer regulations including, but not limited to, continuing education intended to ensure the continuing competency of persons licensed pursuant to this chapter. The board may establish different requirements for physical therapists and physical therapist assistants. The board may not require the completion of an additional postsecondary degree or successful completion of an examination as a condition of renewal, but may recognize these as demonstrative of continuing competency. This program shall include provisions requiring random audits of licensees in order to ensure compliance.

(c) The administration of this section may be funded through professional license fees, continuing education provider fees, and recognized approval agency fees. The fees shall not exceed the amounts necessary to cover the actual costs of administering this section.

(Added by renumbering Section 2676 by Stats. 2013, Ch. 389, Sec. 73. Effective January 1, 2014.)

Article 5:   Educational Standards

§2650. Physical Therapist and Physical Therapist Assistant Educational Requirements
(a) The physical therapist education requirements are as follows:
(1) Except as otherwise provided in this chapter, each applicant for a license as a physical therapist shall be a graduate of a professional degree program of an accredited postsecondary institution or institutions approved by the board and shall have completed a professional education program including academic course work and clinical internship in physical therapy.
(2) Unless otherwise specified by the board by regulation, the educational requirements shall include instruction in the subjects prescribed by the Commission on Accreditation in Physical Therapy Education (CAPTE) of the American Physical Therapy Association or Physiotherapy Education Accreditation Canada and shall include a combination of didactic and clinical experiences. The clinical experience shall include at least 18 weeks of full-time experience with a variety of patients.

(b) The physical therapist assistant educational requirements are as follows:
(1) Except as otherwise provided in this chapter, each applicant for a license as a physical therapist assistant shall be a graduate of a physical therapist assistant program of an accredited postsecondary institution or institutions approved by the board, and shall have completed both the academic and clinical experience required by the physical therapist assistant program, and have been awarded an associate degree.
(2) Unless otherwise specified by the board by regulation, the educational requirements shall include instruction in the subjects prescribed by the CAPTE of the American Physical Therapy Association or Physiotherapy Education Accreditation Canada or another body as may be approved by the board by regulation and shall include a combination of didactic and clinical experiences.

(Amended by Stats. 2015, Ch. 426, Sec. 20. Effective January 1, 2016.)

§2651. Physical Therapist and Physical Therapist Assistant Education Programs; Approval
The board shall approve only those physical therapist and physical therapist assistant education programs that prove to the satisfaction of the board that they comply with the minimum physical
therapist or physical therapist assistant educational requirements set forth in this chapter and adopted by the board pursuant to this chapter. Physical therapist and physical therapist assistant education programs that are accredited by the Commission on Accreditation in Physical Therapy Education of the American Physical Therapy Association, Physiotherapy Education Accreditation Canada, or such other body as may be approved by the board by regulation shall be deemed approved by the board unless the board determines otherwise. This chapter shall not prohibit the board from disapproving any foreign physical therapist or physical therapist assistant educational program or from denying an applicant if, in the opinion of the board, the instruction received by the applicant or the courses offered by the program were not equivalent to that which is required by this chapter.

(Amended by Stats. 2013, Ch. 389, Sec. 47. Effective January 1, 2014.)

§2653. Applicants from Foreign Schools; Qualifications
An applicant for a license as a physical therapist who has graduated from a physical therapist education program that is not approved by the board and is not located in the United States shall do all of the following:
(a) Furnish documentary evidence satisfactory to the board, that he or she has completed a professional degree in a physical therapist educational program substantially equivalent at the time of his or her graduation to that issued by a board approved physical therapist education program. The professional degree must entitle the applicant to practice as a physical therapist in the country where the diploma was issued. The applicant shall meet the educational requirements set forth in paragraph (2) of subdivision (a) of Section 2650. The board may require an applicant to submit documentation of his or her education to a credentials evaluation service for review and a report to the board.
(b) Demonstrate proficiency in English by achieving a score specified by the board on the Test of English as a Foreign Language administered by the Educational Testing Services or such other examination as may be specified by the board by regulation.
(c) Complete nine months of clinical service in a location approved by the board under the supervision of a physical therapist licensed by a United States jurisdiction, in a manner satisfactory to the board. The applicant shall have passed the written examination required in Section 2636 prior to commencing the period of clinical service. The board shall require the supervising physical therapist to evaluate the applicant and report his or her findings to the board. The board may in its discretion waive all or part of the required clinical service pursuant to guidelines set forth in its regulations. During the period of clinical service, the applicant shall be identified as a physical therapist license applicant. If an applicant fails to complete the required period of clinical service, the board may, for good cause shown, allow the applicant to complete another period of clinical service.
(Repealed and added by Stats. 2013, Ch. 389, Sec. 50. Effective January 1, 2014.)

§2654. Applicants Graduating from Foreign Program and Failing to Qualify to Take Physical Therapist Examination; Eligibility for Physical Therapist Assistant Examination
If an applicant who has graduated from a physical therapist education program that is not approved by the board and is not located in the United States does not qualify to take the physical
therapist examination, his or her education may be evaluated by the board and the applicant may be eligible to take the physical therapist assistant examination.
(Added by Stats. 2013, Ch. 389, Sec. 51. Effective January 1, 2014.)

Article 6:  Enforcement

§2660. Disciplinary Action
Unprofessional conduct constitutes grounds for citation, discipline, denial of a license, or issuance of a probationary license. The board may, after the conduct of appropriate proceedings under the Administrative Procedure Act (Chapter 4.5 (commencing with Section 11400) of Part 1 of Division 3 of Title 2 of the Government Code), issue a citation, impose discipline, deny a license, suspend for not more than 12 months, or revoke, or impose probationary conditions upon any license issued under this chapter for unprofessional conduct that includes, in addition to other provisions of this chapter, but is not limited to, the following:
(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the violation of, or conspiring to violate any provision of this chapter, any regulations duly adopted under this chapter, or the Medical Practice Act (Chapter 5 (commencing with Section 2000)).
(b) Advertising in violation of Section 17500.
(c) Obtaining or attempting to obtain a license by fraud or misrepresentation.
(d) Practicing or offering to practice beyond the scope of practice of physical therapy.
(e) Conviction of a crime that substantially relates to the qualifications, functions, or duties of a physical therapist or physical therapist assistant. The record of conviction or a certified copy thereof shall be conclusive evidence of that conviction.
(f) Unlawful possession or use of, or conviction of a criminal offense involving, a controlled substance as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code, or any dangerous drug as defined in Article 2 (commencing with Section 4015) of Chapter 9, as follows:
(1) Obtaining or possessing in violation of law, or except as directed by a licensed physician and surgeon, dentist, or podiatrist, administering to himself or herself, or furnishing or administering to another, any controlled substance or any dangerous drug.
(2) Using any controlled substance or any dangerous drug.
(3) Conviction of a criminal offense involving the consumption or self-administration of, or the possession of, or falsification of a record pertaining to, any controlled substance or any dangerous drug, in which event the record of the conviction is conclusive evidence thereof.
(g) Failure to maintain adequate and accurate records relating to the provision of services to his or her patients.
(h) Gross negligence or repeated acts of negligence in practice or in the delivery of physical therapy care.
(i) Aiding or abetting any person to engage in the unlawful practice of physical therapy.
(j) The commission of any fraudulent, dishonest, or corrupt act that is substantially related to the qualifications, functions, or duties of a physical therapist or physical therapist assistant.
(k) Except for good cause, the knowing failure to protect patients by failing to follow infection control guidelines of the board, thereby risking transmission of bloodborne infectious diseases from licensee to patient, from patient to patient, and from patient to licensee. In administering
this subdivision, the board shall consider referencing the standards, regulations, and guidelines of the State Department of Public Health developed pursuant to Section 1250.11 of the Health and Safety Code and the standards, regulations, and guidelines pursuant to the California Occupational Safety and Health Act of 1973 (Part 1 (commencing with Section 6300) of Division 5 of the Labor Code) for preventing the transmission of HIV, hepatitis B, and other bloodborne pathogens in health care settings. As necessary, the board shall consult with the Medical Board of California, the California Board of Podiatric Medicine, the Dental Board of California, the Board of Registered Nursing, and the Board of Vocational Nursing and Psychiatric Technicians of the State of California, to encourage appropriate consistency in the implementation of this subdivision.

(l) The commission of verbal abuse or sexual harassment.

(m) Engaging in sexual misconduct or violating Section 726.

(n) Permitting a physical therapist assistant or physical therapy aide under one’s supervision or control to perform, or permitting the physical therapist assistant or physical therapy aide to hold himself or herself out as competent to perform, professional services beyond the level of education, training, and experience of the physical therapist assistant or aide.

(o) The revocation, suspension, or other discipline, restriction, or limitation imposed by another state upon a license or certificate to practice physical therapy issued by that state, or the revocation, suspension, or restriction of the authority to practice physical therapy by any agency of the federal government.

(p) Viewing a completely or partially disrobed patient in the course of treatment if the viewing is not necessary to patient evaluation or treatment under current standards.

(q) Engaging in any act in violation of Section 650, 651, or 654.2.

(r) Charging a fee for services not performed.

(s) Misrepresenting documentation of patient care or deliberate falsifying of patient records.

(t) Except as otherwise allowed by law, the employment of runners, cappers, steerers, or other persons to procure patients.

(u) The willful, unauthorized violation of professional confidence.

(v) Failing to maintain confidentiality, except as otherwise required or permitted by law, of all information that has been received from a patient in confidence during the course of treatment and all information about the patient that is obtained from tests or other means.

(w) Habitual intemperance.

(x) Failure to comply with the provisions of Section 2620.1.

(Amended by Stats. 2014, Ch. 71, Sec. 5. Effective January 1, 2015.)

§2660.1. Sexual Activity

A patient, client, or customer of a licentiate under this chapter is conclusively presumed to be incapable of giving free, full, and informed consent to any sexual activity which is a violation of Section 726.

(Added by Stats. 1992, Ch. 1289, Sec. 19. Effective January 1, 1993.)

§2660.2. Issuance of Probationary License to Applicants

(a) The board may refuse a license to any applicant guilty of unprofessional conduct or sexual activity referred to in Section 2660.1. The board may, in its sole discretion, issue a public letter
of reprimand or may issue a probationary license to any applicant for a license who is guilty of unprofessional conduct but who has met all other requirements for licensure. The board may issue the license subject to any terms or conditions not contrary to public policy, including, but not limited to, the following:
(1) Medical or psychiatric evaluation.
(2) Continuing medical or psychiatric treatment.
(3) Restriction of the type or circumstances of practice.
(4) Continuing participation in a board-approved rehabilitation program.
(5) Abstention from the use of alcohol or drugs.
(6) Random fluid testing for alcohol or drugs.
(7) Compliance with laws and regulations governing the practice of physical therapy.
(b) The applicant shall have the right to appeal the denial, or the issuance with terms and conditions, of any license in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the board shall have all the powers granted therein. The action shall be final, except that the propriety of the action is subject to review by the superior court pursuant to Section 1094.5 of the Code of Civil Procedure.
(c) In lieu of refusing a license, the board may, upon stipulation or agreement by the licensee, issue a public letter of reprimand after it has conducted an investigation or inspection as provided for in this chapter. The public letter of reprimand may include a requirement for specified training or education, and cost recovery for investigative costs. The board shall notify the licensee of its intention to issue the letter 30 days before the intended issuance date of the letter. The licensee shall indicate in writing at least 15 days prior to the letter’s intended issuance date whether he or she agrees to the issuance of the letter. The board, at its option, may extend the time within which the licensee may respond to its notification. If the licensee does not agree to the issuance of the letter, the board shall not issue the letter and may proceed to file the accusation. The board may use a public letter of reprimand only for minor violations, as defined by the board, committed by the applicant. A public letter of reprimand issued pursuant to this section shall be disclosed by the board to an inquiring member of the public and shall be posted on the board’s Internet Web site.
(Amended by Stats. 2013, Ch. 389, Sec. 55. Effective January 1, 2014.)

§2660.3. Issuance of Public Letter of Reprimand in Lieu of Filing of Prosecuting Formal Accusation
In lieu of filing or prosecuting a formal accusation against a licensee, the board may, upon stipulation or agreement by the licensee, issue a public letter of reprimand after it has conducted an investigation or inspection as provided for in this chapter. The public letter of reprimand may include a requirement for specified training or education, and cost recovery for investigative costs. The board shall notify the licensee of its intention to issue the letter 30 days before the intended issuance date of the letter. The licensee shall indicate in writing at least 15 days prior to the letter’s intended issuance date whether he or she agrees to the issuance of the letter. The board, at its option, may extend the time within which the licensee may respond to its notification. If the licensee does not agree to the issuance of the letter, the board shall not issue the letter and may proceed to file the accusation. The board may use a public letter of reprimand only for minor violations, as defined by the board, committed by the licensee. A public letter of
reprimand issued pursuant to this section shall be disclosed by the board to an inquiring member of the public and shall be posted on the board’s Internet Web site.  
(Amended by Stats. 2013, Ch. 389, Sec. 56. Effective January 1, 2014.)

§2660.4. Failure or Refusal to Provide Medical Records
A licensee who fails or refuses to comply with a request from the board for the medical records of a patient, that is accompanied by that patient’s written authorization for release of records to the board, within 15 days of receiving the request and authorization shall pay to the board a civil penalty of one thousand dollars ($1,000) per day for each day that the records have not been produced after the 15th day, unless the licensee is unable to provide the records within this time period for good cause.  
(Added by Stats. 2013, Ch. 389, Sec. 57. Effective January 1, 2014.)

§2660.5. Denial of License in Specified Circumstances
The board shall deny a physical therapist license or physical therapist assistant license to an applicant who is required to register pursuant to Section 290 of the Penal Code. This section does not apply to an applicant who is required to register as a sex offender pursuant to Section 290 of the Penal Code solely because of a misdemeanor conviction under Section 314 of the Penal Code.  
(Amended by Stats. 2013, Ch. 389, Sec. 58. Effective January 1, 2014.)

§2660.7. Conduct Constituting Subversion of Licensing Examination; Additional Penalties
In addition to the penalties prescribed by Section 123, if the board determines that an applicant for licensure or a licensee has engaged, or has attempted to engage, in conduct that subverts or undermines the integrity of the examination process as described in Section 123, the board may disqualify the applicant from taking the examination or may deny his or her application for licensure or may revoke the license of the licensee.  
(Added by Stats. 2008, Ch. 301, Sec. 9. Effective January 1, 2009.)

§2660.8. Disciplinary Action After hearing by Medical Quality Hearing Panel, or Default or Stipulation with Board
A licensee whose matter has been heard by an administrative law judge of the Medical Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default has been entered or who has entered into a stipulation for disciplinary action with the board, may, in accordance with the provisions of this chapter:
(a) Have his or her license revoked upon order of the board.
(b) Have his or her right to practice suspended for a period not to exceed one year upon order of the board.
(c) Be placed on probation and required to pay the costs of probation monitoring upon order of the board.
(d) Be publicly reprimanded by the board.
(e) Be required to surrender his or her license based on an order of the board.
(f) Have any other action taken in relation to discipline as part of an order of probation, as the board or an administrative law judge may deem proper.  
(Added by Stats. 2013, Ch. 389, Sec. 59. Effective January 1, 2014.)
§2661. Conviction of a Crime
A plea or verdict of guilty or a conviction following a plea of nolo contendere is deemed to be a conviction within the meaning of this article. The board may order discipline of the licensee in accordance with Section 2660 or the board may take action as authorized in Section 2660.2 on an application when the time for appeal has elapsed, or the judgment of conviction has been affirmed on appeal or when an order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under Section 1203.4 of the Penal Code allowing that person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, information, or indictment.
(Amended by Stats. 2013, Ch. 389, Sec. 60. Effective January 1, 2014.)

§2661.5. Recovery of Investigation and Prosecution Costs
(a) In any order issued in resolution of a disciplinary proceeding before the board, the board may request the administrative law judge to direct any licensee found guilty of unprofessional conduct to pay to the board a sum not to exceed the actual and reasonable costs of the investigation and prosecution of the case.
(b) The costs to be assessed shall be fixed by the administrative law judge and shall not in any event be increased by the board. When the board does not adopt a proposed decision and remands the case to an administrative law judge, the administrative law judge shall not increase the amount of the assessed costs specified in the proposed decision.
(c) When the payment directed in an order for payment of costs is not made by the licensee, the board may enforce the order of payment by bringing an action in any appropriate court. This right of enforcement shall be in addition to any other rights the board may have as to any licensee directed to pay costs.
(d) In any judicial action for the recovery of costs, proof of the board’s decision shall be conclusive proof of the validity of the order of payment and the terms for payment.
(e) (1) Except as provided in paragraph (2), the board shall not renew or reinstate the license or approval of any person who has failed to pay all of the costs ordered under this section.
(2) Notwithstanding paragraph (1), the board may, in its discretion, conditionally renew or reinstate for a maximum of one year the license or approval of any person who demonstrates financial hardship and who enters into a formal agreement with the board to reimburse the board within that one year period for those unpaid costs.
(f) All costs recovered under this section shall be deposited in the Physical Therapy Fund as a reimbursement in either the fiscal year in which the costs are actually recovered or the previous fiscal year, as the board may direct.
(Amended by Stats. 1996, Ch. 829, Sec. 51. Effective January 1, 1997.)

§2661.6. Probation Monitoring Program
(a) The board shall establish a probation monitoring program to monitor probationary licenses.
(b) The program may employ nonpeace officer staff to perform its probation monitoring.
(c) The program shall be funded with moneys in the Physical Therapy Fund.
(Added by Stats. 2002, Ch. 1150, Sec. 13. Effective January 1, 2003.)
§2661.7. License Reinstatement
(a) A person whose license has been revoked or suspended, or who has been placed on probation, may petition the board for reinstatement or modification of penalty, including modification or termination of probation, after a period of not less than the following minimum periods has elapsed from the effective date of the decision ordering that disciplinary action:
(1) At least three years for reinstatement of a license or approval revoked for unprofessional conduct, except that the board may, for good cause shown, specify in a revocation order that a petition for reinstatement may be filed after two years.
(2) At least two years for early termination or one year for modification of a condition of probation of three years or more.
(3) At least one year for reinstatement of a license revoked for mental or physical illness, or for modification of a condition, or termination of probation of less than three years.
(b) The petition shall state any facts as may be required by the board. The petition shall be accompanied by at least two verified recommendations from physical therapists licensed by the board who have personal knowledge of the activities of the petitioner since the disciplinary penalty was imposed.
(c) The petition may be heard by the board. The board may assign the petition to an administrative law judge designated in Section 11371 of the Government Code. After a hearing on the petition, the administrative law judge shall provide a proposed decision to the board that shall be acted upon in accordance with the Administrative Procedure Act.
(d) The board or the administrative law judge hearing the petition may consider all activities of the petitioner since the disciplinary action was taken, the offense for which the petitioner was disciplined, the petitioner’s activities during the time the license was in good standing, and the petitioner’s rehabilitative efforts, general reputation for truth, and professional ability. The hearing may be continued, as the board or the administrative law judge designated in Section 11371 of the Government Code finds necessary.
(e) The administrative law judge designated in Section 11371 of the Government Code when hearing a petition for reinstating a license, or modifying a penalty, may recommend the imposition of any terms and conditions deemed necessary.
(f) No petition shall be considered while the petitioner is under sentence for any criminal offense, including any period during which the petitioner is on court-imposed probation or parole. No petition shall be considered while there is an accusation or petition to revoke probation pending against the petitioner. The board may deny, without a hearing or argument, any petition filed pursuant to this section within a period of two years from the effective date of the prior decision following a hearing under this section.
(g) Nothing in this section shall be deemed to alter Sections 822 and 823.
(Amended by Stats. 2013, Ch. 389, Sec. 61. Effective January 1, 2014.)

Article 7: Substance Abuse Rehabilitation Program
§2662. Legislative Intent
It is the intent of the Legislature that the board shall seek ways and means to identify and rehabilitate physical therapists and physical therapist assistants whose competency is impaired
due to abuse of dangerous drugs or alcohol so that they may be treated and returned to the practice of physical therapy in a manner which will not endanger the public health and safety.  
(Amended by Stats. 1996, Ch. 829, Sec. 52. Effective January 1, 1997.)

§2663. Substance Abuse Rehabilitation Program
The board shall establish and administer a substance abuse rehabilitation program, hereafter referred to as the rehabilitation program, for the rehabilitation of physical therapists and physical therapist assistants whose competency is impaired due to the abuse of drugs or alcohol. The board may contract with any other state agency or a private organization to perform its duties under this article. The board may establish one or more rehabilitation evaluation committees to assist it in carrying out its duties under this article. Any rehabilitation evaluation committee established by the board shall operate under the direction of the rehabilitation program manager, as designated by the executive officer of the board. The program manager has the primary responsibility to review and evaluate recommendations of the committee.  
(Amended by Stats. 2013, Ch. 389, Sec. 63. Effective January 1, 2014.)

§2664. Composition
(a) Any rehabilitation evaluation committee established by the board shall have at least three members. In making appointments to a rehabilitation evaluation committee, the board shall consider the appointment of persons who are either recovering from substance abuse and have been free from substance abuse for at least three years immediately prior to their appointment or who are knowledgeable in the treatment and recovery of substance abuse. The board also shall consider the appointment of a physician and surgeon who is board certified in psychiatry.  
(b) Appointments to a rehabilitation evaluation committee shall be by the affirmative vote of a majority of members appointed to the board. Each appointment shall be at the pleasure of the board for a term not to exceed four years. In its discretion, the board may stagger the terms of the initial members so appointed.  
(c) A majority of the members of a rehabilitation evaluation committee shall constitute a quorum for the transaction of business. Any action requires an affirmative vote of a majority of those members present at a meeting constituting at least a quorum. Each rehabilitation evaluation committee shall elect from its membership a chairperson and a vice chairperson. Notwithstanding the Bagley-Keene Open Meeting Act (Article 9 (commencing with Section 11120) of Chapter 1 of Part 1 of Division 3 of Title 2 of the Government Code), relating to public meetings, a rehabilitation evaluation committee may convene in closed session to consider matters relating to any physical therapist or physical therapist assistant applying for or participating in a rehabilitation program, and a meeting which will be convened entirely in closed session need not comply with Section 11125 of the Government Code. A rehabilitation evaluation committee shall only convene in closed session to the extent it is necessary to protect the privacy of an applicant or participant. Each member of a rehabilitation evaluation committee shall receive a per diem and shall be reimbursed for expenses as provided in Section 103.  
(Amended by Stats. 2013, Ch. 389, Sec. 64. Effective January 1, 2014.)
§2665. Duties and Responsibilities
Each rehabilitation evaluation committee has the following duties and responsibilities:
(a) To evaluate physical therapists and physical therapist assistants who request participation in the rehabilitation program and to make recommendations. In making recommendations, the committee shall consider any recommendations from professional consultants on the admission of applicants to the rehabilitation program.
(b) To review and designate treatment facilities to which physical therapists and physical therapist assistants in the rehabilitation program may be referred.
(c) To receive and review information concerning physical therapists and physical therapist assistants participating in the program.
(d) Calling meetings as necessary to consider the requests of physical therapists and physical therapist assistants to participate in the rehabilitation program, to consider reports regarding participants in the program, and to consider any other matters referred to it by the board.
(e) To consider whether each participant in the rehabilitation program may with safety continue or resume the practice of physical therapy.
(f) To set forth in writing the terms and conditions of the rehabilitation agreement that is approved by the program manager for each physical therapist and physical therapist assistant participating in the program, including treatment, supervision, and monitoring requirements.
(g) To hold a general meeting at least twice a year, which shall be open and public, to evaluate the rehabilitation program’s progress, to prepare reports to be submitted to the board, and to suggest proposals for changes in the rehabilitation program.
(h) For the purposes of Division 3.6 (commencing with Section 810) of Title 1 of the Government Code, any member of a rehabilitation evaluation committee shall be considered a public employee. No board or rehabilitation evaluation committee member, contractor, or agent thereof, shall be liable for any civil damage because of acts or omissions which may occur while acting in good faith in a program established pursuant to this article.
(Amended by Stats. 2013, Ch. 389, Sec. 65. Effective January 1, 2014.)

§2666. Criteria for Acceptance
(a) Criteria for acceptance into the rehabilitation program shall include all of the following:
(1) The applicant shall be licensed as a physical therapist or as a physical therapist assistant by the board and shall be a resident of California.
(2) The applicant shall be found to abuse dangerous drugs or alcoholic beverages in a manner that may affect his or her ability to practice physical therapy safely or competently.
(3) The applicant shall have voluntarily requested admission to the program or shall be accepted into the program in accordance with terms and conditions resulting from a disciplinary action.
(4) The applicant shall agree to undertake any medical or psychiatric examination ordered to evaluate the applicant for participation in the program.
(5) The applicant shall cooperate with the program by providing medical information, disclosure authorizations, and releases of liability as may be necessary for participation in the program.
(6) The applicant shall agree in writing to cooperate with all elements of the treatment program designed for him or her.
Any applicant may be denied participation in the program if the board, the program manager, or a rehabilitation evaluation committee determines that the applicant will not substantially benefit
from participation in the program or that the applicant’s participation in the program creates too great a risk to the public health, safety, or welfare.

(b) A participant may be terminated from the program for any of the following reasons:
(1) The participant has successfully completed the treatment program.
(2) The participant has failed to comply with the treatment program designated for him or her.
(3) The participant fails to meet any of the criteria set forth in subdivision (a) or (c).
(4) It is determined that the participant has not substantially benefited from participation in the program or that his or her continued participation in the program creates too great a risk to the public health, safety, or welfare. Whenever an applicant is denied participation in the program or a participant is terminated from the program for any reason other than the successful completion of the program, and it is determined that the continued practice of physical therapy by that individual creates too great a risk to the public health, safety, and welfare, that fact shall be reported to the executive officer of the board and all documents and information pertaining to and supporting that conclusion shall be provided to the executive officer. The matter may be referred for investigation and disciplinary action by the board. Each physical therapist or physical therapy assistant who requests participation in a rehabilitation program shall agree to cooperate with the recovery program designed for him or her. Any failure to comply with that program may result in termination of participation in the program.

The rehabilitation evaluation committee shall inform each participant in the program of the procedures followed in the program, of the rights and responsibilities of a physical therapist or physical therapist assistant in the program, and the possible results of noncompliance with the program.

(c) In addition to the criteria and causes set forth in subdivision (a), the board may set forth in its regulations additional criteria for admission to the program or causes for termination from the program.

(Amended by Stats. 2013, Ch. 389, Sec. 66. Effective January 1, 2014.)

§2667. Confidentiality of Records
All board and rehabilitation evaluation committee records and records of proceedings and participation of a physical therapist or physical therapist assistant in a program shall be confidential and are not subject to discovery or subpoena.

(Amended by Stats. 2013, Ch. 389, Sec. 67. Effective January 1, 2014.)

§2668. Participation Fee
(a) A fee to cover the actual cost of administering the program shall be charged for participation in the program. If the board contracts with any other entity to carry out this article, at the discretion of the board, the fee may be collected and retained by that entity.
(b) If the board contracts with any other entity to carry out this section, the executive officer of the board, or his or her designee, shall review the activities and performance of the contractor on a biennial basis. As part of this review, the board shall review files of participants in the program. However, the names of participants who entered the program voluntarily shall remain confidential, except when the review reveals misdiagnosis, case mismanagement, or noncompliance by the participant.
(c) Subdivision (a) shall apply to all new participants entering into the board’s rehabilitation program on or after January 1, 2007. Subdivision (a) shall apply on and after January 1, 2008, to participants currently enrolled as of December 31, 2007.

(Amended by Stats. 2013, Ch. 389, Sec. 68. Effective January 1, 2014.)

§2669. Participation Not a Defense
Participation in a rehabilitation program shall not be a defense to any disciplinary action that may be taken by the board. This section does not preclude the board from commencing disciplinary action against a physical therapist or physical therapist assistant who is terminated unsuccessfully from the program. That disciplinary action may not include as evidence any confidential information.

(Amended by Stats. 2013, Ch. 389, Sec. 69. Effective January 1, 2014.)

Article 8: Offenses Against this Chapter

§2670. Violations of Misdemeanor
Any person who violates any of the provisions of this chapter shall be guilty of a misdemeanor, punishable by a fine not exceeding one thousand dollars ($1,000) or imprisonment in a county jail not exceeding six months, or by both.

(Amended by Stats. 1983, Ch. 1092, Sec. 9. Effective September 27, 1983. Operative January 1, 1984, by Sec. 427 of Ch. 1092.)

§2672. Injunctions
Whenever any person has engaged or is about to engage in any acts or practices that constitute or will constitute an offense against this chapter, the superior court of any county, on application of the board, or 10 or more persons holding physical therapist licenses issued under this chapter, may issue an injunction or other appropriate order restraining the conduct. Proceedings under this section shall be governed by Chapter 3 (commencing with Section 525) of Title 7 of Part 2 of the Code of Civil Procedure.

(Amended by Stats. 2013, Ch. 389, Sec. 71. Effective January 1, 2014.)

Article 9: Fiscal Administration

§2680. Records
The board shall keep a record of its proceedings under this chapter, and a register of all persons licensed under it. The register shall show the name of every living licensee, his or her last known place of residence, and the date and number of his or her license as a physical therapist. The board shall compile a list of physical therapists authorized to practice physical therapy in the state. Any interested person is entitled to obtain a copy of that list upon application to the board and payment of such amount as may be fixed by the board which amount shall not exceed the cost of the list so furnished.

(Amended by Stats. 1996, Ch. 829, Sec. 61. Effective January 1, 1997.)
§2681. Reports
Within 10 days after the beginning of each calendar month the board shall report to the State Controller the amount and source of all collections made from persons licensed or seeking to be licensed under this chapter and at the same time pay all such sums into the State Treasury, where they shall be credited to the Physical Therapy Fund.
(Added by renumbering Section 2693 by Stats. 1968, Ch. 1284.)

§2682. Fund
There is in the State Treasury the Physical Therapy Fund. All collections from persons licensed or seeking to be licensed shall be paid by the board into the fund after reporting to the Controller at the beginning of each month the amount and source of the collections. All money in the Physical Therapy Fund is appropriated for the exclusive purpose of executing this chapter.
(Amended by Stats. 2013, Ch. 389, Sec. 75. Effective January 1, 2014.)

§2687. Fee, Fines, and Forfeitures
All fees earned by the board and all fines and forfeitures of bail to which the board is entitled shall be reported at the beginning of each month, for the month preceding, to the State Controller. At the same time, the entire amount of these collections shall be paid into the State Treasury and shall be credited to the Physical Therapy Fund.
This fund shall be for the use of the board to pay all salaries and all other expenses necessarily incurred in carrying into effect the provisions of this chapter.
(Amended by Stats. 2005, Ch. 74, Sec. 7. Effective July 19, 2005.)

§2688. Fee Schedule
The amount of fees assessed in connection with licenses issued under this chapter is as follows:
(a) (1) The fee for an application for licensure as a physical therapist submitted to the board prior to March 1, 2009, shall be seventy-five dollars ($75). The fee for an application submitted under Section 2653 to the board prior to March 1, 2009, shall be one hundred twenty-five dollars ($125).
(2) The fee for an application for licensure as a physical therapist submitted to the board on or after March 1, 2009, shall be one hundred twenty-five dollars ($125). The fee for an application submitted under Section 2653 to the board on or after March 1, 2009, shall be two hundred dollars ($200).
(3) Notwithstanding paragraphs (1) and (2), the board may decrease or increase the amount of an application fee under this subdivision to an amount that does not exceed the cost of administering the application process, but in no event shall the application fee amount exceed three hundred dollars ($300).
(b) The examination and reexamination fees for the physical therapist examination, physical therapist assistant examination, and the examination to demonstrate knowledge of the California rules and regulations related to the practice of physical therapy shall be the actual cost to the board of the development and writing of, or purchase of the examination, and grading of each written examination, plus the actual cost of administering each examination. The board, at its discretion, may require the licensure applicant to pay the fee for the examinations required by Section 2636 directly to the organization conducting the examination.
(c) (1) The fee for a physical therapist license issued prior to March 1, 2009, shall be seventy-five dollars ($75).
(2) The fee for a physical therapist license issued on or after March 1, 2009, shall be one hundred dollars ($100).
(3) Notwithstanding paragraphs (1) and (2), the board may decrease or increase the amount of the fee under this subdivision to an amount that does not exceed the cost of administering the process to issue the license, but in no event shall the fee to issue the license exceed one hundred fifty dollars ($150).
(d) (1) The fee to renew a physical therapist license that expires prior to April 1, 2009, shall be one hundred fifty dollars ($150).
(2) The fee to renew a physical therapist license that expires on or after April 1, 2009, shall be two hundred dollars ($200).
(3) Notwithstanding paragraphs (1) and (2), the board may decrease or increase the amount of the renewal fee under this subdivision to an amount that does not exceed the cost of the renewal process, but in no event shall the renewal fee amount exceed three hundred dollars ($300).
(e) (1) The fee for application and for issuance of a physical therapist assistant license shall be seventy-five dollars ($75) for an application submitted to the board prior to March 1, 2009.
(2) The fee for application and for issuance of a physical therapist assistant license shall be one hundred twenty-five dollars ($125) for an application submitted to the board on or after March 1, 2009. The fee for an application submitted under Section 2653 to the board on or after March 1, 2009, shall be two hundred dollars ($200).
(3) Notwithstanding paragraphs (1) and (2), the board may decrease or increase the amount of the fee under this subdivision to an amount that does not exceed the cost of administering the application process, but in no event shall the application fee amount exceed three hundred dollars ($300).
(f) (1) The fee to renew a physical therapist assistant license that expires prior to April 1, 2009, shall be one hundred fifty dollars ($150).
(2) The fee to renew a physical therapist assistant license that expires on or after April 1, 2009, shall be two hundred dollars ($200).
(3) Notwithstanding paragraphs (1) and (2), the board may decrease or increase the amount of the renewal fee under this subdivision to an amount that does not exceed the cost of the renewal process, but in no event shall the renewal fee amount exceed three hundred dollars ($300).
(g) Notwithstanding Section 163.5, the delinquency fee shall be 50 percent of the renewal fee in effect.
(h) (1) The duplicate wall certificate fee shall be fifty dollars ($50). The duplicate renewal receipt fee amount shall be fifty dollars ($50).
(2) Notwithstanding paragraph (1), the board may decrease or increase the amount of the fee under this subdivision to an amount that does not exceed the cost of issuing duplicates, but in no event shall that fee exceed one hundred dollars ($100).
(i) (1) The endorsement or letter of good standing fee shall be sixty dollars ($60).
(2) Notwithstanding paragraph (1), the board may decrease or increase the amount of the fee under this subdivision to an amount that does not exceed the cost of issuing an endorsement or letter, but in no event shall the fee amount exceed one hundred dollars ($100).
(Amended by Stats. 2008, Ch. 301, Sec. 10. Effective January 1, 2009.)
§2688.5. Report to the Legislature
The board shall submit a report to the fiscal and appropriate policy committees of the legislature whenever the board increases any fee. The report shall specify the justification for the increase and the percentage of the fee increase to be used for enforcement purposes.
(Amended by Stats. 1996, Ch. 829, Sec. 67. Effective January 1, 1997.)

§2689. Special Certification Fees
(a) The board may establish by regulation suitable application and renewal fees of not more than two hundred dollars ($200), for persons certified to perform electromyographical testing pursuant to Section 2620.5, based upon the cost of operating the certification program. The application fee shall be paid by the applicant at the time the application is filed and the renewal fee shall be paid as provided in Section 2683.
(b) The board shall charge an examination and reexamination fee of five hundred dollars ($500) to applicants who are examined and who have been found to otherwise meet the board’s standards for certification.
(Amended by Stats. 1996, Ch. 829, Sec. 68. Effective January 1, 1997.)

Article 10: Physical Therapy Corporations

§2690. Definition
A physical therapy corporation is a corporation that is authorized to render professional services, as defined in Section 13401 of the Corporations Code, so long as that corporation and its shareholders, officers, directors, and employees rendering professional services who are physical therapists are in compliance with the Moscone-Knox Professional Corporation Act, this article and all other statutes and regulations now or hereafter enacted or adopted pertaining to the corporation and the conduct of its affairs.
With respect to a physical therapy corporation, the governmental agency referred to in the Moscone-Knox Professional Corporation Act is the Physical Therapy Board of California.
(Amended by Stats. 1996, Ch. 829, Sec. 69. Effective January 1, 1997.)

§2691. Unprofessional Conduct - Licensee
It shall constitute unprofessional conduct and a violation of this chapter for any person licensed under this chapter to violate, attempt to violate, directly or indirectly, or assist in or abet the violation of, or conspire to violate any provision or term of this article, the Moscone-Knox Professional Corporation Act, or any regulations duly adopted under those laws.
(Repealed and added by Stats. 1980, Ch. 1314, Sec. 10.)

§2692. Unprofessional Conduct - Corporation
A physical therapy corporation shall not do or fail to do any act the doing of which or the failure to do which would constitute unprofessional conduct under any statute or regulation, now or hereafter in effect. In the conduct of its practice, it shall observe and be bound by such statutes and regulations to the same extent as a person holding a license under this chapter.
(Repealed and added by Stats. 1980, Ch. 1314, Sec. 10.)
§2693. Corporation Name
The name of a physical therapy corporation and any name or names under which it may render professional services shall contain the words “physical therapy” or “physical therapist”, and wording or abbreviations denoting corporate existence.
(Repealed and added by Stats. 1980, Ch. 1314, Sec. 10.)

§2694. Directors and Officers
Except as provided in Section 13403 of the Corporations Code, each shareholder, director and officer of a physical therapy corporation, except an assistant secretary and an assistant treasurer, shall be a licensed person as defined in Section 13401 of the Corporations Code.
(Repealed and added by Stats. 1980, Ch. 1314, Sec. 10.)

§2695. Income
The income of a physical therapy corporation attributable to professional services rendered while a shareholder is a disqualified person, as defined in Section 13401 of the Corporations Code, shall not in any manner accrue to the benefit of such shareholder or his or her shares in the physical therapy corporation.
(Repealed and added by Stats. 1980, Ch. 1314, Sec. 10.)

§2696. Regulations
The board may adopt and enforce regulations to carry out the purposes and objectives of this article, including regulations requiring (a) that the bylaws of a physical therapy corporation shall include a provision whereby the capital stock of the corporation owned by a disqualified person (as defined in Section 13401 of the Corporations Code), or a deceased person, shall be sold to the corporation or to the remaining shareholders of the corporation within the time as the regulations may provide, and (b) that a physical therapy corporation shall provide adequate security by insurance or otherwise for claims against it by its patients arising out of the rendering of professional services.
(Amended by Stats. 1996, Ch. 829, Sec. 70. Effective January 1, 1997.)
§13400. Citation
This part shall be known and may be cited as the “Moscone-Knox Professional Corporation Act.”
(Added by Stats. 1968, Ch. 1375.)

§13401. Definitions
As used in this part:
(a) “Professional services” means any type of professional services that may be lawfully rendered only pursuant to a license, certification, or registration authorized by the Business and Professions Code, the Chiropractic Act, or the Osteopathic Act.
(b) “Professional corporation” means a corporation organized under the General Corporation Law or pursuant to subdivision (b) of Section 13406 that is engaged in rendering professional services in a single profession, except as otherwise authorized in Section 13401.5, pursuant to a certificate of registration issued by the governmental agency regulating the profession as herein provided and that in its practice or business designates itself as a professional or other corporation as may be required by statute. However, any professional corporation or foreign professional corporation rendering professional services by persons duly licensed by the Medical Board of California or any examining committee under the jurisdiction of the board, the Osteopathic Medical Board of California, the Dental Board of California, the Dental Hygiene Committee of California, the California State Board of Pharmacy, the Veterinary Medical Board, the California Architects Board, the Court Reporters Board of California, the Board of Behavioral Sciences, the Speech-Language Pathology and Audiology Board, the Board of Registered Nursing, or the State Board of Optometry shall not be required to obtain a certificate of registration in order to render those professional services.
(c) “Foreign professional corporation” means a corporation organized under the laws of a state of the United States other than this state that is engaged in a profession of a type for which there is authorization in the Business and Professions Code for the performance of professional services by a foreign professional corporation.
(d) “Licensed person” means any natural person who is duly licensed under the provisions of the Business and Professions Code, the Chiropractic Act, or the Osteopathic Act to render the same professional services as are or will be rendered by the professional corporation or foreign professional corporation of which he or she is, or intends to become, an officer, director, shareholder, or employee.
(e) “Disqualified person” means a licensed person who for any reason becomes legally disqualified (temporarily or permanently) to render the professional services that the particular professional corporation or foreign professional corporation of which he or she is an officer, director, shareholder, or employee is or was rendering.
§13401.3. Definition of Professional Services
As used in this part, “professional services” also means any type of professional services that may be lawfully rendered only pursuant to a license, certification, or registration authorized by the Yacht and Ship Brokers Act (Article 2 (commencing with Section 700) of Chapter 5 of Division 3 of the Harbors and Navigation Code).

§13401.5. Licensees as Shareholders, Officers, Directors, or Employees
Notwithstanding subdivision (d) of Section 13401 and any other provision of law, the following licensed persons may be shareholders, officers, directors, or professional employees of the professional corporations designated in this section so long as the sum of all shares owned by those licensed persons does not exceed 49 percent of the total number of shares of the professional corporation so designated herein, and so long as the number of those licensed persons owning shares in the professional corporation so designated herein does not exceed the number of persons licensed by the governmental agency regulating the designated professional corporation. This section does not limit employment by a professional corporation designated in this section to only those licensed professionals listed under each subdivision. Any person duly licensed under Division 2 (commencing with Section 500) of the Business and Professions Code, the Chiropractic Act, or the Osteopathic Act may be employed to render professional services by a professional corporation designated in this section.

(a) Medical corporation.
(1) Licensed doctors of podiatric medicine.
(2) Licensed psychologists.
(3) Registered nurses.
(4) Licensed optometrists.
(5) Licensed marriage and family therapists.
(6) Licensed clinical social workers.
(7) Licensed physician assistants.
(8) Licensed chiropractors.
(9) Licensed acupuncturists.
(10) Naturopathic doctors.
(11) Licensed professional clinical counselors.
(12) Licensed physical therapists.
(13) Licensed pharmacists.

(b) Podiatric medical corporation.
(1) Licensed physicians and surgeons.
(2) Licensed psychologists.
(3) Registered nurses.
(4) Licensed optometrists.
(5) Licensed chiropractors.
(6) Licensed acupuncturists.
(7) Naturopathic doctors.
(8) Licensed physical therapists.
(c) Psychological corporation.
(1) Licensed physicians and surgeons.
(2) Licensed doctors of podiatric medicine.
(3) Registered nurses.
(4) Licensed optometrists.
(5) Licensed marriage and family therapists.
(6) Licensed clinical social workers.
(7) Licensed chiropractors.
(8) Licensed acupuncturists.
(9) Naturopathic doctors.
(10) Licensed professional clinical counselors.
(d) Speech-language pathology corporation.
(1) Licensed audiologists.
(e) Audiology corporation.
(1) Licensed speech-language pathologists.
(f) Nursing corporation.
(1) Licensed physicians and surgeons.
(2) Licensed doctors of podiatric medicine.
(3) Licensed psychologists.
(4) Licensed optometrists.
(5) Licensed marriage and family therapists.
(6) Licensed clinical social workers.
(7) Licensed physician assistants.
(8) Licensed chiropractors.
(9) Licensed acupuncturists.
(10) Naturopathic doctors.
(11) Licensed professional clinical counselors.
(g) Marriage and family therapist corporation.
(1) Licensed physicians and surgeons.
(2) Licensed psychologists.
(3) Licensed clinical social workers.
(4) Registered nurses.
(5) Licensed chiropractors.
(6) Licensed acupuncturists.
(7) Naturopathic doctors.
(8) Licensed professional clinical counselors.
(h) Licensed clinical social worker corporation.
(1) Licensed physicians and surgeons.
(2) Licensed psychologists.
(3) Licensed marriage and family therapists.
(4) Registered nurses.
(5) Licensed chiropractors.
(6) Licensed acupuncturists.
(7) Naturopathic doctors.
(8) Licensed professional clinical counselors.
(i) Physician assistants corporation.
(1) Licensed physicians and surgeons.
(2) Registered nurses.
(3) Licensed acupuncturists.
(4) Naturopathic doctors.
(j) Optometric corporation.
(1) Licensed physicians and surgeons.
(2) Licensed doctors of podiatric medicine.
(3) Licensed psychologists.
(4) Registered nurses.
(5) Licensed chiropractors.
(6) Licensed acupuncturists.
(7) Naturopathic doctors.
(k) Chiropractic corporation.
(1) Licensed physicians and surgeons.
(2) Licensed doctors of podiatric medicine.
(3) Licensed psychologists.
(4) Registered nurses.
(5) Licensed optometrists.
(6) Licensed marriage and family therapists.
(7) Licensed clinical social workers.
(8) Licensed acupuncturists.
(9) Naturopathic doctors.
(10) Licensed professional clinical counselors.
(l) Acupuncture corporation.
(1) Licensed physicians and surgeons.
(2) Licensed doctors of podiatric medicine.
(3) Licensed psychologists.
(4) Registered nurses.
(5) Licensed optometrists.
(6) Licensed marriage and family therapists.
(7) Licensed clinical social workers.
(8) Licensed physician assistants.
(9) Licensed chiropractors.
(10) Naturopathic doctors.
(11) Licensed professional clinical counselors.
(m) Naturopathic doctor corporation.
(1) Licensed physicians and surgeons.
(2) Licensed psychologists.
(3) Registered nurses.
(4) Licensed physician assistants.
(5) Licensed chiropractors.
(6) Licensed acupuncturists.
(7) Licensed physical therapists.
(8) Licensed doctors of podiatric medicine.
(9) Licensed marriage and family therapists.
(10) Licensed clinical social workers.
(11) Licensed optometrists.
(12) Licensed professional clinical counselors.
(n) Dental corporation.
(1) Licensed physicians and surgeons.
(2) Dental assistants.
(3) Registered dental assistants.
(4) Registered dental assistants in extended functions.
(5) Registered dental hygienists.
(6) Registered dental hygienists in extended functions.
(7) Registered dental hygienists in alternative practice.
(o) Professional clinical counselor corporation.
(1) Licensed physicians and surgeons.
(2) Licensed psychologists.
(3) Licensed clinical social workers.
(4) Licensed marriage and family therapists.
(5) Registered nurses.
(6) Licensed chiropractors.
(7) Licensed acupuncturists.
(8) Naturopathic doctors.
(p) Physical therapy corporation.
(1) Licensed physicians and surgeons.
(2) Licensed doctors of podiatric medicine.
(3) Licensed acupuncturists.
(4) Naturopathic doctors.
(5) Licensed occupational therapists.
(6) Licensed speech-language therapists.
(7) Licensed audiologists.
(8) Registered nurses.
(9) Licensed psychologists.
(10) Licensed physician assistants.
(q) Registered dental hygienist in alternative practice corporation.
(1) Registered dental assistants.
(2) Licensed dentists.
(3) Registered dental hygienists.
(4) Registered dental hygienists in extended functions.

(Amended by Stats. 2016, Ch. 484, Sec. 53. Effective January 1, 2017.)
§13402. Effect on Existing Laws
(a) This part shall not apply to any corporation now in existence or hereafter organized which may lawfully render professional services other than pursuant to this part, nor shall anything herein contained alter or affect any right or privilege, whether under any existing or future provision of the Business and Professions Code or otherwise, in terms permitting or not prohibiting performance of professional services through the use of any form of corporation permitted by the General Corporation Law.
(b) The conduct of a business in this state by a corporation pursuant to a license or registration issued under any state law, except laws relating to taxation, shall not be considered to be the conduct of a business as a professional corporation if the business is conducted by, and the license or registration is issued to, a corporation which is not a professional corporation within the meaning of this part, whether or not a professional corporation could conduct the same business, or portions of the same business, as a professional corporation.
(Amended by Stats. 1988, Ch. 919, Sec. 13.)

§13403. General Corporation Law; Applicability
The provisions of the General Corporation Law shall apply to professional corporations, except where such provisions are in conflict with or inconsistent with the provisions of this part. A professional corporation which has only one shareholder need have only one director who shall be such shareholder and who shall also serve as the president and treasurer of the corporation. The other officers of the corporation in such situation need not be licensed persons. A professional corporation which has only two shareholders need have only two directors who shall be such shareholders. The two shareholders between them shall fill the offices of president, vice president, secretary and treasurer.
A professional medical corporation may establish in its articles or bylaws the manner in which its directors are selected and removed, their powers, duties, and compensation. Each term of office may not exceed three years. Notwithstanding the foregoing, the articles or bylaws of a professional medical corporation with more than 200 shareholders may provide that directors who are officers of the corporation or who are responsible for the management of all medical services at one or more medical centers may have terms of office, as directors, of up to six years; however, no more than 50 percent of the members of the board, plus one additional member of the board, may have six-year terms of office.
(Amended by Stats. 1980, Ch. 36.)

§13404. Formation; Certificate of Registration
A corporation may be formed under the General Corporation Law or pursuant to subdivision (b) of Section 13406 for the purposes of qualifying as a professional corporation in the manner provided in this part and rendering professional services. The articles of incorporation of a professional corporation shall contain a specific statement that the corporation is a professional corporation within the meaning of this part. Except as provided in subdivision (b) of Section 13401, no professional corporation shall render professional services in this state without a currently effective certificate of registration issued by the governmental agency regulating the profession in which such corporation is or proposes to be engaged, pursuant to the applicable
provisions of the Business and Professions Code or the Chiropractic Act expressly authorizing such professional services to be rendered by a professional corporation.

(Amended by Stats. 1993, Ch. 955, Sec. 6. Effective January 1, 1994.)

§13404.5. Foreign Professional Corporation
(a) A foreign professional corporation may qualify as a foreign corporation to transact intrastate business in this state in accordance with Chapter 21 (commencing with Section 2100) of Division 1. A foreign professional corporation shall be subject to the provisions of the General Corporation Law applicable to foreign corporations, except where those provisions are in conflict with or inconsistent with the provisions of this part. The statement and designation filed by the foreign professional corporation pursuant to Section 2105 shall contain a specific statement that the corporation is a foreign professional corporation within the meaning of this part.
(b) No foreign professional corporation shall render professional services in this state without a currently effective certificate of registration issued by the governmental agency regulating the profession in which that corporation proposes to be engaged, pursuant to the applicable provisions of the Business and Professions Code expressly authorizing those professional services to be rendered by a foreign professional corporation.
(c) If the California board, commission, or other agency that prescribes the rules or regulations governing a particular profession either now or hereafter requires that the shareholders of the professional corporation bear any degree of personal liability for the acts of the corporation, either by personal guarantee or in some other form that the governing agency prescribes, the shareholders of a foreign corporation that has been qualified to do business in this state in the same profession shall, as a condition of doing business in this state, be subject, with regard to the rendering of professional services by the professional corporation in California, or for California residents, to the same degree of personal liability, if any, as is prescribed by the governing agency for shareholders of a California professional corporation rendering services in the same profession.
(d) Each application by a foreign professional corporation to qualify to do business in this state shall contain the following statement:
“The shareholders of the undersigned foreign professional corporation shall be subject, with regard to the rendering of professional services by the professional corporation in California, or for California residents, to the same degree of personal liability, if any, in California as is from time to time prescribed by the agency governing the profession in this state for shareholders in a California professional corporation rendering services in the same profession. This application accordingly constitutes a submission to the jurisdiction of the courts of California to the same extent, but only to the same extent, as applies to the shareholders of a California professional corporation in the same profession. The foregoing submission to jurisdiction is a condition of qualification to do business in this state.”
(Added by Stats. 1993, Ch. 910, Sec. 3. Effective January 1, 1994.)

§13405. Corporation May Render Services
(a) Subject to the provisions of Section 13404, a professional corporation may lawfully render professional services in this state, but only through employees who are licensed persons. The corporation may employ persons not so licensed, but such persons shall not render any
professional services rendered or to be rendered by that corporation in this state. A professional
corporation may render professional services outside of this state, but only through employees
who are licensed to render the same professional services in the jurisdiction or jurisdictions in
which the person practices. Nothing in this section is intended to prohibit the rendition of
occasional professional services in another jurisdiction as an incident to the licensee’s primary
practice, so long as it is permitted by the governing agency that regulates the particular
profession in the jurisdiction. Nothing in this section is intended to prohibit the rendition of
occasional professional services in this state as an incident to a professional employee’s primary
practice for a foreign professional corporation qualified to render professional services in this
state, so long as it is permitted by the governing agency that regulates the particular profession
in this state.

(b) Subject to Section 13404.5, a foreign professional corporation qualified to render professional
services in this state may lawfully render professional services in this state, but only through
employees who are licensed persons, and shall render professional services outside of this state
only through persons who are licensed to render the same professional services in the jurisdiction
or jurisdictions in which the person practices. The foreign professional corporation may employ
persons in this state who are not licensed in this state, but those persons shall not render any
professional services rendered or to be rendered by the corporation in this state.

(c) Nothing in this section or in this part is intended to, or shall, augment, diminish or otherwise
alter existing provisions of law, statutes or court rules relating to services by a California attorney
in another jurisdiction, or services by an out-of-state attorney in California. These existing
provisions, including, but not limited to, admission pro hac vice and the taking of depositions in
a jurisdiction other than the one in which the deposing attorney is admitted to practice, shall
remain in full force and effect.

(Amended by Stats. 1993, Ch. 910, Sec. 4. Effective January 1, 1994.)

§13406. Professional Corporations; Stock; Financial Statements; Voting; Non-Profit Law
Corporations

(a) Subject to the provisions of subdivision (b), shares of capital stock in a professional
corporation may be issued only to a licensed person or to a person who is licensed to render the
same professional services in the jurisdiction or jurisdictions in which the person practices, and
any shares issued in violation of this restriction shall be void. Unless there is a public offering of
securities by a professional corporation or by a foreign professional corporation in this state, its
financial statements shall be treated by the Commissioner of Corporations as confidential, except
to the extent that such statements shall be subject to subpoena in connection with any judicial
or administrative proceeding, and may be admissible in evidence therein. No shareholder of a
professional corporation or of a foreign professional corporation qualified to render professional
services in this state shall enter into a voting trust, proxy, or any other arrangement vesting
another person (other than another person who is a shareholder of the same corporation) with
the authority to exercise the voting power of any or all of his or her shares, and any such
purported voting trust, proxy or other arrangement shall be void.

(b) A professional law corporation may be incorporated as a nonprofit public benefit corporation
under the Nonprofit Public Benefit Corporation Law under either of the following circumstances:
The corporation is a qualified legal services project or a qualified support center within the meaning of subdivisions (a) and (b) of Section 6213 of the Business and Professions Code.

The professional law corporation otherwise meets all of the requirements and complies with all of the provisions of the Nonprofit Public Benefit Corporation Law, as well as all of the following requirements:

(A) All of the members of the corporation, if it is a membership organization as described in the Nonprofit Corporation Law, are persons licensed to practice law in California.
(B) All of the members of the professional law corporation’s board of directors are persons licensed to practice law in California.
(C) Seventy percent of the clients to whom the corporation provides legal services are lower income persons as defined in Section 50079.5 of the Health and Safety Code, and to other persons who would not otherwise have access to legal services.
(D) The corporation shall not enter into contingency fee contracts with clients.

(c) A professional law corporation incorporated as a nonprofit public benefit corporation that is a recipient in good standing as defined in subdivision (c) of Section 6213 of the Business and Professions Code shall be deemed to have satisfied all of the filing requirements of a professional law corporation under Sections 6161.1, 6162, and 6163 of the Business and Professions Code.

(Amended by Stats. 1993, Ch. 955, Sec. 7.5. Effective January 1, 1994.)

§13407. Transfer of Shares; Restriction; Purchase by Corporations; Suspension of Revocation of Certificate

Shares in a professional corporation or a foreign professional corporation qualified to render professional services in this state may be transferred only to a licensed person, to a shareholder of the same corporation, to a person licensed to practice the same profession in the jurisdiction or jurisdictions in which the person practices, or to a professional corporation, and any transfer in violation of this restriction shall be void, except as provided herein.

A professional corporation may purchase its own shares without regard to any restrictions provided by law upon the repurchase of shares, if at least one share remains issued and outstanding.

If a professional corporation or a foreign professional corporation qualified to render professional services in this state shall fail to acquire all of the shares of a shareholder who is disqualified from rendering professional services in this state or of a deceased shareholder who was, on his or her date of death, licensed to render professional services in this state, or if such a disqualified shareholder or the representative of such a deceased shareholder shall fail to transfer said shares to the corporation, to another shareholder of the corporation, to a person licensed to practice the same profession in the jurisdiction or jurisdictions in which the person practices, or to a licensed person, within 90 days following the date of disqualification, or within six months following the date of death of the shareholder, as the case may be, then the certificate of registration of the corporation may be suspended or revoked by the governmental agency regulating the profession in which the corporation is engaged. In the event of such a suspension or revocation, the corporation shall cease to render professional services in this state.

Notwithstanding any provision in this part, upon the death or incapacity of a dentist, any individual named in subdivision (a) of Section 1625.3 of the Business and Professions Code may employ licensed dentists and dental assistants and charge for their professional services for a professional services.
period not to exceed 12 months from the date of death or incapacity of the dentist. The employment of licensed dentists and dental assistants shall not be deemed the practice of dentistry within the meaning of Section 1625 of the Business and Professions Code, provided that all of the requirements of Section 1625.4 of the Business and Professions Code are met. If an individual listed in Section 1625.3 of the Business and Professions Code is employing licensed persons and dental assistants, then the shares of a deceased or incapacitated dentist shall be transferred as provided in this section no later than 12 months from the date of death or incapacity of the dentist.

(Amended by Stats. 2007, Ch. 433, Sec. 4. Effective January 1, 2008.)

§13408. Specifications of Grounds for Suspension or Revocation of Certificate
The following shall be grounds for the suspension or revocation of the certificate of registration of a professional corporation or a foreign professional corporation qualified to render professional services in this state: (a) if all shareholders who are licensed persons of such corporation shall at any one time become disqualified persons, or (b) if the sole shareholder shall become a disqualified person, or (c) if such corporation shall knowingly employ or retain in its employment a disqualified person, or (d) if such corporation shall violate any applicable rule or regulation adopted by the governmental agency regulating the profession in which such corporation is engaged, or (e) if such corporation shall violate any statute applicable to a professional corporation or to a foreign professional corporation, or (f) any ground for such suspension or revocation specified in the Business and Professions Code relating to the profession in which such corporation is engaged. In the event of such suspension or revocation of its certificate of registration such corporation shall cease forthwith to render professional services in this state.

(Amended by Stats. 1993, Ch. 910, Sec. 7. Effective January 1, 1994.)

§13408.5. Fee Splitting or Kickbacks
No professional corporation may be formed so as to cause any violation of law, or any applicable rules and regulations, relating to fee splitting, kickbacks, or other similar practices by physicians and surgeons or psychologists, including, but not limited to, Section 650 or subdivision (e) of Section 2960 of the Business and Professions Code. A violation of any such provisions shall be grounds for the suspension or revocation of the certificate of registration of the professional corporation. The Commissioner of Corporations or the Director of the Department of Managed Health Care may refer any suspected violation of such provisions to the governmental agency regulating the profession in which the corporation is, or proposes to be engaged.

(Amended by Stats. 2000, Ch. 857, Sec. 7. Effective January 1, 2001.)

§13409. Name of Corporation; Provision Governing
(a) A professional corporation may adopt any name permitted by a law expressly applicable to the profession in which such corporation is engaged or by a rule or regulation of the governmental agency regulating such profession. The provisions of subdivision (b) of Section 201 shall not apply to the name of a professional corporation if such name shall contain and be restricted to the name or the last name of one or more of the present, prospective, or former shareholders or of persons who were associated with a predecessor person, partnership or other
organization or whose name or names appeared in the name of such predecessor organization, and the Secretary of State shall have no authority by reason of subdivision (b) of Section 201 to refuse to file articles of incorporation which set forth such a name; provided, however, that such name shall not be substantially the same as the name of a domestic corporation, the name of a foreign corporation qualified to render professional services in this state which is authorized to transact business in this state, or a name which is under reservation for another corporation. The Secretary of State may require proof by affidavit or otherwise establishing that the name of the professional corporation complies with the requirements of this section and of the law governing the profession in which such professional corporation is engaged. The statements of fact in such affidavits may be accepted by the Secretary of State as sufficient proof of the facts.

(b) A foreign professional corporation qualified to render professional services in this state may transact intrastate business in this state by any name permitted by a law expressly applicable to the profession in which the corporation is engaged, or by a rule or regulation of the governmental agency regulating the rendering of professional services in this state by the corporation. The provisions of subdivision (b) of Section 201 shall not apply to the name of a foreign professional corporation if the name contains and is restricted to the name or the last name of one or more of the present, prospective, or former shareholders or of persons who were associated with a predecessor person, partnership, or other organization, or whose name or names appeared in the name of the predecessor organization, and the Secretary of State shall have no authority by reason of subdivision (b) of Section 201 to refuse to issue a certificate of qualification to a foreign professional corporation that sets forth that name in its statement and designation; provided, however, that such a name shall not be substantially the same as the name of a domestic corporation, the name of a foreign corporation qualified to render professional services in the state, or a name that is under reservation for another corporation. The Secretary of State may require proof by affidavit or otherwise establishing that the name of the foreign professional corporation qualified to render professional services in this state complies with the requirements of this section and of the law governing the profession in which the foreign professional corporation qualified to render professional services in this state proposes to engage in this state. The statements of fact in such affidavits may be accepted by the Secretary of State as sufficient proof of the facts.

(Amended by Stats. 1993, Ch. 910, Sec. 8. Effective January 1, 1994.)

§13410. Disciplinary Rules and Regulations
(a) A professional corporation or a foreign professional corporation qualified to render professional services in this state shall be subject to the applicable rules and regulations adopted by, and all the disciplinary provisions of the Business and Professions Code expressly governing the practice of the profession in this state, and to the powers of, the governmental agency regulating the profession in which such corporation is engaged. Nothing in this part shall affect or impair the disciplinary powers of any such governmental agency over licensed persons or any law, rule or regulation pertaining to the standards for professional conduct of licensed persons or to the professional relationship between any licensed person furnishing professional services and the person receiving such services.
(b) With respect to any foreign professional corporation qualified to render professional services in this state, each such governmental agency shall adopt rules, regulations, and orders as appropriate to restrict or prohibit any disqualified person from doing any of the following:

1. Being a shareholder, director, officer, or employee of the corporation.
2. Rendering services in any profession in which he or she is a disqualified person.
3. Participating in the management of the corporation.
4. Sharing in the income of the corporation.

(Amended by Stats. 1993, Ch. 910, Sec. 10. Effective January 1, 1994.)
Article 2. Reports of Injuries

§11160. Injuries Required to be Reported; Method of Reporting
(a) Any health practitioner employed in a health facility, clinic, physician’s office, local or state public health department, or a clinic or other type of facility operated by a local or state public health department who, in his or her professional capacity or within the scope of his or her employment, provides medical services for a physical condition to a patient whom he or she knows or reasonably suspects is a person described as follows, shall immediately make a report in accordance with subdivision (b):
(1) Any person suffering from any wound or other physical injury inflicted by his or her own act or inflicted by another where the injury is by means of a firearm.
(2) Any person suffering from any wound or other physical injury inflicted upon the person where the injury is the result of assaultive or abusive conduct.
(b) Any health practitioner employed in a health facility, clinic, physician’s office, local or state public health department, or a clinic or other type of facility operated by a local or state public health department shall make a report regarding persons described in subdivision (a) to a local law enforcement agency as follows:
(1) A report by telephone shall be made immediately or as soon as practically possible.
(2) A written report shall be prepared on the standard form developed in compliance with paragraph (4) of this subdivision, and Section 11160.2, and adopted by the Office of Emergency Services, or on a form developed and adopted by another state agency that otherwise fulfills the requirements of the standard form. The completed form shall be sent to a local law enforcement agency within two working days of receiving the information regarding the person.
(3) A local law enforcement agency shall be notified and a written report shall be prepared and sent pursuant to paragraphs (1) and (2) even if the person who suffered the wound, other injury, or assaultive or abusive conduct has expired, regardless of whether or not the wound, other injury, or assaultive or abusive conduct was a factor contributing to the death, and even if the evidence of the conduct of the perpetrator of the wound, other injury, or assaultive or abusive conduct was discovered during an autopsy.
(4) The report shall include, but shall not be limited to, the following:
(A) The name of the injured person, if known.
(B) The injured person’s whereabouts.
(C) The character and extent of the person’s injuries.
(D) The identity of any person the injured person alleges inflicted the wound, other injury, or assaultive or abusive conduct upon the injured person.
(c) For the purposes of this section, “injury” shall not include any psychological or physical condition brought about solely through the voluntary administration of a narcotic or restricted dangerous drug.

(d) For the purposes of this section, “assaultive or abusive conduct” shall include any of the following offenses:

1. Murder, in violation of Section 187.
2. Manslaughter, in violation of Section 192 or 192.5.
3. Mayhem, in violation of Section 203.
4. Aggravated mayhem, in violation of Section 205.
5. Torture, in violation of Section 206.
6. Assault with intent to commit mayhem, rape, sodomy, or oral copulation, in violation of Section 220.
7. Administering controlled substances or anesthetic to aid in commission of a felony, in violation of Section 222.
8. Battery, in violation of Section 242.
9. Sexual battery, in violation of Section 243.4.
10. Incest, in violation of Section 285.
11. Throwing any vitriol, corrosive acid, or caustic chemical with intent to injure or disfigure, in violation of Section 244.
12. Assault with a stun gun or taser, in violation of Section 244.5.
13. Assault with a deadly weapon, firearm, assault weapon, or machinegun, or by means likely to produce great bodily injury, in violation of Section 245.
14. Rape, in violation of Section 261.
15. Spousal rape, in violation of Section 262.
16. Procuring any female to have sex with another man, in violation of Section 266, 266a, 266b, or 266c.
17. Child abuse or endangerment, in violation of Section 273a or 273d.
18. Abuse of spouse or cohabitant, in violation of Section 273.5.
19. Sodomy, in violation of Section 286.
20. Lewd and lascivious acts with a child, in violation of Section 288.
22. Sexual penetration, in violation of Section 289.
23. Elder abuse, in violation of Section 368.
24. An attempt to commit any crime specified in paragraphs (1) to (23), inclusive.

(e) When two or more persons who are required to report are present and jointly have knowledge of a known or suspected instance of violence that is required to be reported pursuant to this section, and when there is an agreement among these persons to report as a team, the team may select by mutual agreement a member of the team to make a report by telephone and a single written report, as required by subdivision (b). The written report shall be signed by the selected member of the reporting team. Any member who has knowledge that the member designated to report has failed to do so shall thereafter make the report.

(f) The reporting duties under this section are individual, except as provided in subdivision (e).

(g) No supervisor or administrator shall impede or inhibit the reporting duties required under this section and no person making a report pursuant to this section shall be subject to any sanction.
for making the report. However, internal procedures to facilitate reporting and apprise supervisors and administrators of reports may be established, except that these procedures shall not be inconsistent with this article. The internal procedures shall not require any employee required to make a report under this article to disclose his or her identity to the employer.

(h) For the purposes of this section, it is the Legislature’s intent to avoid duplication of information.

(Amended by Stats. 2013, Ch. 352, Sec. 418. Effective September 26, 2013. Operative July 1, 2013, by Sec. 543 of Ch. 352.)

Article 2.5. Child Abuse and Neglect Reporting Act

§11166. Duty to Report
(a) Except as provided in subdivision (d), and in Section 11166.05, a mandated reporter shall make a report to an agency specified in Section 11165.9 whenever the mandated reporter, in his or her professional capacity or within the scope of his or her employment, has knowledge of or observes a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect. The mandated reporter shall make an initial report by telephone to the agency immediately or as soon as is practicably possible, and shall prepare and send, fax, or electronically transmit a written follow-up report within 36 hours of receiving the information concerning the incident. The mandated reporter may include with the report any nonprivileged documentary evidence the mandated reporter possesses relating to the incident.

(1) For purposes of this article, “reasonable suspicion” means that it is objectively reasonable for a person to entertain a suspicion, based upon facts that could cause a reasonable person in a like position, drawing, when appropriate, on his or her training and experience, to suspect child abuse or neglect. “Reasonable suspicion” does not require certainty that child abuse or neglect has occurred nor does it require a specific medical indication of child abuse or neglect; any “reasonable suspicion” is sufficient. For purposes of this article, the pregnancy of a minor does not, in and of itself, constitute a basis for a reasonable suspicion of sexual abuse.

(2) The agency shall be notified and a report shall be prepared and sent, faxed, or electronically transmitted even if the child has expired, regardless of whether or not the possible abuse was a factor contributing to the death, and even if suspected child abuse was discovered during an autopsy.

(3) A report made by a mandated reporter pursuant to this section shall be known as a mandated report.

(b) If, after reasonable efforts, a mandated reporter is unable to submit an initial report by telephone, he or she shall immediately or as soon as is practicably possible, by fax or electronic transmission, make a one-time automated written report on the form prescribed by the Department of Justice, and shall also be available to respond to a telephone follow-up call by the agency with which he or she filed the report. A mandated reporter who files a one-time automated written report because he or she was unable to submit an initial report by telephone is not required to submit a written follow-up report.

(1) The one-time automated written report form prescribed by the Department of Justice shall be clearly identifiable so that it is not mistaken for a standard written follow-up report.
addition, the automated one-time report shall contain a section that allows the mandated reporter to state the reason the initial telephone call was not able to be completed. The reason for the submission of the one-time automated written report in lieu of the procedure prescribed in subdivision (a) shall be captured in the Child Welfare Services/Case Management System (CWS/CMS). The department shall work with stakeholders to modify reporting forms and the CWS/CMS as is necessary to accommodate the changes enacted by these provisions.

(2) This subdivision shall not become operative until the CWS/CMS is updated to capture the information prescribed in this subdivision.

(3) This subdivision shall become inoperative three years after this subdivision becomes operative or on January 1, 2009, whichever occurs first.

(4) On the inoperative date of these provisions, a report shall be submitted to the counties and the Legislature by the State Department of Social Services that reflects the data collected from automated one-time reports indicating the reasons stated as to why the automated one-time report was filed in lieu of the initial telephone report.

(5) Nothing in this section shall supersede the requirement that a mandated reporter first attempt to make a report via telephone, or that agencies specified in Section 11165.9 accept reports from mandated reporters and other persons as required.

(c) A mandated reporter who fails to report an incident of known or reasonably suspected child abuse or neglect as required by this section is guilty of a misdemeanor punishable by up to six months confinement in a county jail or by a fine of one thousand dollars ($1,000) or by both that imprisonment and fine. If a mandated reporter intentionally conceals his or her failure to report an incident known by the mandated reporter to be abuse or severe neglect under this section, the failure to report is a continuing offense until an agency specified in Section 11165.9 discovers the offense.

(d) (1) A clergy member who acquires knowledge or a reasonable suspicion of child abuse or neglect during a penitential communication is not subject to subdivision (a). For the purposes of this subdivision, “penitential communication” means a communication, intended to be in confidence, including, but not limited to, a sacramental confession, made to a clergy member who, in the course of the discipline or practice of his or her church, denomination, or organization, is authorized or accustomed to hear those communications, and under the discipline, tenets, customs, or practices of his or her church, denomination, or organization, has a duty to keep those communications secret.

(2) Nothing in this subdivision shall be construed to modify or limit a clergy member’s duty to report known or suspected child abuse or neglect when the clergy member is acting in some other capacity that would otherwise make the clergy member a mandated reporter.

(3) (A) On or before January 1, 2004, a clergy member or any custodian of records for the clergy member may report to an agency specified in Section 11165.9 that the clergy member or any custodian of records for the clergy member, prior to January 1, 1997, in his or her professional capacity or within the scope of his or her employment, other than during a penitential communication, acquired knowledge or had a reasonable suspicion that a child had been the victim of sexual abuse and that the clergy member or any custodian of records for the clergy member did not previously report the abuse to an agency specified in Section 11165.9. The provisions of Section 11172 shall apply to all reports made pursuant to this paragraph.
(B) This paragraph shall apply even if the victim of the known or suspected abuse has reached the age of majority by the time the required report is made.

(C) The local law enforcement agency shall have jurisdiction to investigate any report of child abuse made pursuant to this paragraph even if the report is made after the victim has reached the age of majority.

(e) (1) A commercial film, photographic print, or image processor who has knowledge of or observes, within the scope of his or her professional capacity or employment, any film, photograph, videotape, negative, slide, or any representation of information, data, or an image, including, but not limited to, any film, filmstrip, photograph, negative, slide, photocopy, videotape, video laser disc, computer hardware, computer software, computer floppy disk, data storage medium, CD-ROM, computer-generated equipment, or computer-generated image depicting a child under 16 years of age engaged in an act of sexual conduct, shall, immediately or as soon as practicably possible, telephonically report the instance of suspected abuse to the law enforcement agency located in the county in which the images are seen. Within 36 hours of receiving the information concerning the incident, the reporter shall prepare and send, fax, or electronically transmit a written follow-up report of the incident with a copy of the image or material attached.

(2) A commercial computer technician who has knowledge of or observes, within the scope of his or her professional capacity or employment, any representation of information, data, or an image, including, but not limited to, any computer hardware, computer software, computer file, computer floppy disk, data storage medium, CD-ROM, computer-generated equipment, or computer-generated image that is retrievable in perceivable form and that is intentionally saved, transmitted, or organized on an electronic medium, depicting a child under 16 years of age engaged in an act of sexual conduct, shall immediately, or as soon as practicably possible, telephonically report the instance of suspected abuse to the law enforcement agency located in the county in which the images or materials are seen. As soon as practicably possible after receiving the information concerning the incident, the reporter shall prepare and send, fax, or electronically transmit a written follow-up report of the incident with a brief description of the images or materials.

(3) For purposes of this article, “commercial computer technician” includes an employee designated by an employer to receive reports pursuant to an established reporting process authorized by subparagraph (B) of paragraph (43) of subdivision (a) of Section 11165.7.

(4) As used in this subdivision, “electronic medium” includes, but is not limited to, a recording, CD-ROM, magnetic disk memory, magnetic tape memory, CD, DVD, thumb drive, or any other computer hardware or media.

(5) As used in this subdivision, “sexual conduct” means any of the following:

(A) Sexual intercourse, including genital-genital, oral-genital, anal-genital, or oral-anal, whether between persons of the same or opposite sex or between humans and animals.

(B) Penetration of the vagina or rectum by any object.

(C) Masturbation for the purpose of sexual stimulation of the viewer.

(D) Sadomasochistic abuse for the purpose of sexual stimulation of the viewer.

(E) Exhibition of the genitals, pubic, or rectal areas of a person for the purpose of sexual stimulation of the viewer.
(f) Any mandated reporter who knows or reasonably suspects that the home or institution in which a child resides is unsuitable for the child because of abuse or neglect of the child shall bring the condition to the attention of the agency to which, and at the same time as, he or she makes a report of the abuse or neglect pursuant to subdivision (a).

(g) Any other person who has knowledge of or observes a child whom he or she knows or reasonably suspects has been a victim of child abuse or neglect may report the known or suspected instance of child abuse or neglect to an agency specified in Section 11165.9. For purposes of this section, “any other person” includes a mandated reporter who acts in his or her private capacity and not in his or her professional capacity or within the scope of his or her employment.

(h) When two or more persons, who are required to report, jointly have knowledge of a known or suspected instance of child abuse or neglect, and when there is agreement among them, the telephone report may be made by a member of the team selected by mutual agreement and a single report may be made and signed by the selected member of the reporting team. Any member who has knowledge that the member designated to report has failed to do so shall thereafter make the report.

(i) (1) The reporting duties under this section are individual, and no supervisor or administrator may impede or inhibit the reporting duties, and no person making a report shall be subject to any sanction for making the report. However, internal procedures to facilitate reporting and apprise supervisors and administrators of reports may be established provided that they are not inconsistent with this article. An internal policy shall not direct an employee to allow his or her supervisor to file or process a mandated report under any circumstances.

(2) The internal procedures shall not require any employee required to make reports pursuant to this article to disclose his or her identity to the employer.

(3) Reporting the information regarding a case of possible child abuse or neglect to an employer, supervisor, school principal, school counselor, coworker, or other person shall not be a substitute for making a mandated report to an agency specified in Section 11165.9.

(j) (1) A county probation or welfare department shall immediately, or as soon as practicably possible, report by telephone, fax, or electronic transmission to the law enforcement agency having jurisdiction over the case, to the agency given the responsibility for investigation of cases under Section 300 of the Welfare and Institutions Code, and to the district attorney’s office every known or suspected instance of child abuse or neglect, as defined in Section 11165.6, except acts or omissions coming within subdivision (b) of Section 11165.2, or reports made pursuant to Section 11165.13 based on risk to a child that relates solely to the inability of the parent to provide the child with regular care due to the parent’s substance abuse, which shall be reported only to the county welfare or probation department. A county probation or welfare department also shall send, fax, or electronically transmit a written report thereof within 36 hours of receiving the information concerning the incident to any agency to which it makes a telephone report under this subdivision.

(2) A county probation or welfare department shall immediately, and in no case in more than 24 hours, report to the law enforcement agency having jurisdiction over the case after receiving information that a child or youth who is receiving child welfare services has been identified as the victim of commercial sexual exploitation, as defined in subdivision (d) of Section 11165.1.
(3) When a child or youth who is receiving child welfare services and who is reasonably believed to be the victim of, or is at risk of being the victim of, commercial sexual exploitation, as defined in Section 11165.1, is missing or has been abducted, the county probation or welfare department shall immediately, or in no case later than 24 hours from receipt of the information, report the incident to the appropriate law enforcement authority for entry into the National Crime Information Center database of the Federal Bureau of Investigation and to the National Center for Missing and Exploited Children.

(k) A law enforcement agency shall immediately, or as soon as practicably possible, report by telephone, fax, or electronic transmission to the agency given responsibility for investigation of cases under Section 300 of the Welfare and Institutions Code and to the district attorney’s office every known or suspected instance of child abuse or neglect reported to it, except acts or omissions coming within subdivision (b) of Section 11165.2, which shall be reported only to the county welfare or probation department. A law enforcement agency shall report to the county welfare or probation department every known or suspected instance of child abuse or neglect reported to it which is alleged to have occurred as a result of the action of a person responsible for the child’s welfare, or as the result of the failure of a person responsible for the child’s welfare to adequately protect the minor from abuse when the person responsible for the child’s welfare knew or reasonably should have known that the minor was in danger of abuse. A law enforcement agency also shall send, fax, or electronically transmit a written report thereof within 36 hours of receiving the information concerning the incident to any agency to which it makes a telephone report under this subdivision.

(Amended by Stats. 2016, Ch. 850, Sec. 5. Effective January 1, 2017.)
§1398. Citation
This regulation may be cited and referred to as “Physical Therapy Regulations.”

HISTORY
1. Repealer of Subchapter 13.2 (Sections 1398-1399.73, not consecutive) and new Subchapter 13.2 (Sections 1398-1399.52, not consecutive) filed 5-20-77; effective thirtieth day thereafter (Register 77, No. 21).
2. Amendment of NOTE filed 4-16-79; effective thirtieth day thereafter (Register 79 No. 16).
3. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
4. Change without regulatory effect amending division heading filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).

§1398.1. Location of Office
The principal office of the Physical Therapy Board of California is located at 2005 Evergreen Street, Sacramento, California 95815.

HISTORY
1. Change without regulatory effect amending section filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
2. Amendment of section and Note filed 3-8-2000; operative 4-7-2000 (Register 2000, No. 10).
3. Change without regulatory effect amending section filed 9-21-2015 pursuant to section 100, title 1, California Code of Regulations (Register 2015, No. 39).

§1398.3. Definitions
Unless the context otherwise requires, for the purpose of the regulations contained in this chapter,
(a) “Board” means the Physical Therapy Board of California;
(b) “Code” means the Business and Professions Code;
(c) “The Physical Therapy Practice Act” consists of Chapter 5.7, of Division 2, of the Business and Professions Code.
(d) “License” as used in these regulations includes a license issued by the Board.
§1398.4. Delegation of Functions

Except for those powers reserved exclusively to the “agency itself” under the Administrative Procedure Act (Section 11500 et seq. of the Government Code), the board delegates and confers upon the executive officer of the board, or in his or her absence, the assistant executive officer of the board or other designee of the executive officer, all functions necessary to the dispatch of business of the board in connection with investigative and administrative proceedings under the jurisdiction of the board.

Note: Authority cited: Section 2615, Business and Professions Code. Reference: Sections 2607, 2607.5, 2608 and 2614, Business and Professions Code; and Sections 11500 and 11415.60, Government Code.

HISTORY
1. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
2. Amendment filed 11-16-92; operative 12-16-92 (Register 92, No. 47).
3. Change without regulatory effect amending section filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
4. Amendment filed 3-8-2000; operative 4-7-2000 (Register 2000, No. 10).
5. Amendment of section and Note filed 7-17-2012; operative 8-16-2012 (Register 2012, No. 29).
6. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

§1398.6. Filing of Addresses

(a) Address of Record. Every applicant and licensee shall provide an address to the Physical Therapy Board of California (Board) that will be designated as their address of record, which will be utilized for all official and formal communications from the Board, and which will be disclosed to the public. An applicant or a licensee need not provide a residence address as the address of record, but may use an alternative address, such as a business address or a P.O. Box, as their address of record. Every applicant and licensee shall report any change of the address of record to the Board no later than thirty (30) calendar days after the address change has occurred. The report of change of address of record shall be in writing and contain the old address, the new address, and the effective date of the change of address.

(b) Residence Address. Every applicant and licensee shall provide a residence address to the Board. Only if the applicant or licensee also provides an alternative address of record as described in subdivision (a) above shall the Board maintain the residence address as confidential. Every
applicant and licensee shall report any change of their residential address to the Board no later than thirty (30) calendar days after the address change has occurred. The report of change of residential address shall be in writing and contain the old address, the new address, and the effective date of the change of address.

(c) Name Change. Every applicant and licensee shall report to the Board in writing each and every change of name no later than thirty (30) calendar days after each change has occurred, giving both the old and new names.

(d) E-mail Address. Every applicant and licensee shall file a current e-mail address with the Board and shall notify the Board in writing of any and all changes of the e-mail address no later than thirty (30) calendar days after the change has occurred, giving both the old e-mail address and the new e-mail address. E-mail addresses are confidential information and shall not be made available to the public. This subdivision does not require an applicant or licensee to obtain an e-mail address, it only requires that person report an existing e-mail address to the Board.

(e) Licensee. For purposes of this section, “licensee” includes any holder of an active, inactive, delinquent, suspended or expired license, certification or other authorization issued by the Board to practice physical therapy or electromyography which is not canceled or revoked.

Note: Authority cited: Section 2615, Business and Professions Code. Reference: Sections 136, 2602.1, 2644 and 2680, Business and Professions Code; and Section 1798.61, Civil Code.

HISTORY
1. Amendment of NOTE filed 4-16-79; effective thirtieth day thereafter (Register 79, No. 16).
2. Amendments filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
3. Change without regulatory effect amending section filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
4. Repealer and new section and amendment of Note filed 12-4-97; operative 1-3-98 (Register 97, No. 49).
5. Amendment of section and Note filed 10-28-2013; operative 1-1-2014 (Register 2013, No. 44).
6. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

§1398.10. Advertising
A physical therapist may advertise the provision of any services authorized to be provided by a physical therapy license. Such advertising shall be in a manner authorized by Section 651 of the Code so long as such advertising does not promote the excessive or unnecessary use of such services.


HISTORY
1. New section filed 2-28-80; effective thirtieth day thereafter (Register 80, No. 9).
2. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).

§1398.11. Physical Therapy Aide, Applicant and Student Identification
Pursuant to Section 680 of the code, each supervising licensed physical therapist shall require all physical therapy aides, applicants and students performing patient related tasks under his or her
supervision to display while working his or her name and working title on a name tag in at least 18-point type.


HISTORY
2. Change without regulatory effect amending section heading and section filed 9-21-2015 pursuant to section 100, title 1, California Code of Regulations (Register 2015, No. 39).

§1398.12. Related Health Sciences
A physical therapy related health science for purposes of Code section 2633, subdivision (b), includes the following: any neuroscience and any anatomical, behavioral, biomedical, physiological, and movement sciences. These sciences specifically include, but are not limited to, biology, biomechanics, exercise physiology, gerontology, human development, kinesiology, pathology, pathomechanics, pharmacology and psychology.


HISTORY
1. New section filed 3-24-2009; operative 4-23-2009 (Register 2009, No. 13).

§1398.13. Patient Records
(a) A physical therapist shall document and sign in the patient record the following in accordance with subsection (c):
(1) Examination and re-examination
(2) Evaluation and reevaluation
(3) Diagnosis
(4) Prognosis and intervention
(5) Treatment plan and modification of the plan of care
(6) Each treatment provided by the physical therapist or a physical therapy aide
(7) Discharge Summary
(b) The physical therapist assistant shall document and sign in the patient record any treatment provided by that individual, in accordance with subsection (c).
(c) With respect to any care provided to the patient, the patient record shall indicate:
(1) The date and nature of the service provided and
(2) The name and title of any individual who provided such service, including the individual's role in that service. As used in this section, the term “service” does not include “non-patient related tasks” as defined in section 1399.
(d) The physical therapist shall ensure compliance with subsection (c).
(e) The requirements of this section are in addition to the requirements of the following sections:
(1) 1398.37(d) [relating to physical therapist students],
(2) 1398.44(e)(1) [relating to physical therapist assistants]
(3) 1398.52(d) [relating to physical therapist assistant students]
(4) 1399.10 [relating to physical therapist license applicants]; and
(5) 1399.12 [relating to physical therapist assistant license applicants].
(f) Electronic signatures are sufficient for purposes of this section.

HISTORY
1. Renumbering and amendment of former section 1399.85 to new section 1398.13 filed 6-14-2011; operative 7-14-2011 (Register 2011, No. 24).
2. Change without regulatory effect amending subsection (e)(1) filed 9-21-2015 pursuant to section 100, title 1, California Code of Regulations (Register 2015, No. 39).

§1398.15. Notice to Consumers
(a) A licensed physical therapist engaged in the practice of physical therapy shall provide Form NTC 12-01, August 2, 2012, to each patient.
(b) The notice required by this section shall be provided by at least one of the following methods:
   (1) Prominently posting Form NTC 12-01, August 2, 2012, in an area visible to patients on the premises where the licensee provides the licensed services; or,
   (2) Providing the patient or the patient's representative with a copy of Form NTC-1201, August 2, 2012. An acknowledgement, signed and dated by the patient or the patient's representative, shall be retained in that patient's medical records demonstrating receipt.

HISTORY
1. New section filed 7-24-2013; operative 10-1-2013 (Register 2013, No. 30).
2. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

Article 2: Applications and Examinations

§1398.20. Place of Filing
Completed applications for all licenses and certifications shall be filed in the office of the board in Sacramento.

HISTORY
1. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27.)
2. Amendment filed 5-15-91; operative 6-14-91 (Register 91, No. 26).
3. Change without regulatory effect amending section filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
4. Amendment of section heading and section filed 3-8-2000; operative 4-7-2000 (Register 2000, No. 10).
6. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).
§1398.21. Abandonment of Applications
An application shall be denied without prejudice when, in the discretion of the board, an applicant does not exercise due diligence in the completion of his or her application, in furnishing additional information or documents requested in or in the payment of any required fees.
HISTORY
1. New section filed 3-20-78; effective thirtieth day thereafter (Register 78, No. 12).
2. Change without regulatory effect amending section filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
3. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

§1398.21.1. Failure to Pass the Examination
An application for licensure shall be deemed denied without prejudice when an applicant fails to pass the examination within one year from the date of the original notice to appear for the examination. To reapply, the applicant is then required to file a new application for licensure, to pay the application fee specified in Section 1399.50(a), 1399.50(b) or 1399.52(a) and 1399.52(b) as applicable, and to comply with all laws and regulations in effect at the time of filing. In addition the applicant is required to apply for reexamination and to pay the applicable reexamination fee pursuant to Business and Professions Code Section 2688.
HISTORY
1. New section filed 11-20-95; operative 12-20-95 (Register 95, No. 47).
3. Change without regulatory effect amending section and Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

§1398.23. Failure to Pay Initial License Fee
An application shall be deemed to have been abandoned and any examination taken not passed if an applicant fails to pay the initial license fee within five years after notification by the board. An applicant whose application has been deemed abandoned may again be eligible for licensure upon re-examination and the filing of an updated application with the current application fee.
HISTORY
1. New section filed 3-20-78; effective thirtieth day thereafter (Register 78, No. 12).
2. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
3. Change without regulatory effect amending section filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
4. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).
§1398.25. Credentials Evaluations Services
In accordance with Section 2653 of the code, the board will accept reports from credentials evaluation services which meet all of the following criteria:
(a) The service retains the services of a physical therapist consultant(s) who is licensed as a physical therapist in a state or territory of the United States and is used in an advisory capacity to review individual cases for comparability to the educational and training requirements of Section 2650 of the code for hours and content.
(b) The service is able to document the experience of its employees by producing positive letters of reference from other state licensing agencies, educational institutions or professional organizations.
(c) The service is able to submit a report to the board that shall be based on a review of original documentation of an applicant's credentials and shall document the following:
(1) The equivalent professional degree the foreign applicant would have received from an accredited physical therapist education program located in the United States.
(2) Whether completion of the foreign applicant's physical therapist education and training entitles the foreign applicant to practice as a physical therapist in the country where the education and training was completed.
(3) Whether the foreign applicant demonstrated English proficiency in accordance with section 1398.26.3.
HISTORY
1. New section filed 8-22-77; effective thirtieth day thereafter (Register 77, No. 35).
2. Repealer filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
3. New section filed 8-31-84; effective thirtieth day thereafter (Register 84, No. 35).
4. New subsections (c)-(c)(2) filed 9-9-94; operative 10-10-94 (Register 94, No. 36).
5. Change without regulatory effect amending first paragraph and subsection (c) filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
6. New subsection (c)(3) and amendment of Note filed 5-8-2017; operative 7-1-2017 (Register 2017, No. 19).

§1398.26. Applications of Foreign Educated Graduates
(a) Persons applying under Section 2653 of the code shall cause to be submitted to an evaluation service, which meets the Board's requirements in section 1398.25, a complete transcript of the resident course of professional instruction completed which has been authenticated by the proper official of the physical therapist education program, and submitted directly by the physical therapist education program to the evaluation service. Credentials submitted in a language other than English shall be accompanied by an original translation certified by a qualified translator other than the applicant.
(b) Where because of circumstances beyond his or her control an applicant is unable to furnish any of the credentials required under subsection (a) above, the board may in its discretion accept other documents which it deems sufficient to establish the applicant's eligibility.
§1398.26.1. Satisfactory Documentary Evidence of Equivalent Degree for Licensure as a Physical Therapist or Physical Therapist Assistant

This section is only applicable to those applicants who are graduates of non-accredited physical therapy educational programs and applying for licensure on or after the effective date of this regulation. For the purposes of determining educational equivalency, the credential evaluation services will evaluate foreign educational credentials based on the corresponding Federation of State Boards of Physical Therapy's Coursework Evaluation Tool For Foreign Educated Physical Therapists (CWT) or, if applying for physical therapist assistant license, the Coursework Tool For Foreign Educated Physical Therapist Assistants (PTA Tool 2007). For the purpose of this regulation, the six following publications are incorporated by reference: (1) FSBPT Coursework Tool For Foreign Educated Physical Therapists Who Graduated before 1978 - CWT 1 (2004), (2) FSBPT Coursework Tool For Foreign Educated Physical Therapists Who Graduated From 1978 to 1991 - CWT 2 (2004), (3) FSBPT Coursework Tool For Foreign Educated Physical Therapists Who Graduated From 1992 to 1997 - CWT 3 (2004), (4) FSBPT Coursework Tool For Foreign Educated Physical Therapists Who Graduated From 1998 to June 30, 2009 - CWT 4 (2004), (5) FSBPT Coursework Tool For Foreign Educated Physical Therapists Who Graduated after June 30, 2009 - CWT 5 (2004) (Rev. 2009-07), (6) Coursework Tool For Foreign Educated Physical Therapist Assistants - PTA Tool 2007 (2004).


HISTORY
1. New section filed 7-5-2005; operative 8-4-2005 (Register 2005, No. 27).

§1398.26.3. English Proficiency

In accordance with Section 2653 of the code, an applicant who graduated from a physical therapist education program that is not approved by the board and is not located in the United States must demonstrate English proficiency by achieving the following minimum scores within a single administration of the Test of English as a Foreign Language (TOEFL):

(1) Reading Section - 22
(2) Listening Section - 21
§1398.26.5. Clinical Service Requirements for Foreign Educated Applicants

(a) The period of clinical service required by Section 2653 of the Code shall be certified by at least one supervising physical therapist (the supervising physical therapist is the Center Coordinator of Clinical Education and/or the Clinical Instructor) licensed by the board, or by a physical therapy licensing authority in another jurisdiction which is accepted by the board.

(b) For the purposes of this regulation, supervision means the supervising physical therapist must be onsite in the same facility and available to the physical therapist license applicant to provide assistance with any patient care.

(c) Effective January 1, 2008, the center coordinator of clinical education (CCCE) must be an American Physical Therapy Association (APTA) certified clinical instructor. Effective January 1, 2010, all clinical instructors must be APTA certified.

(d) The certification shall be submitted in a report to the board and shall document the supervising physical therapist's determination that the physical therapist license applicant possesses the skills necessary to perform any physical therapy evaluation or any physical therapy procedure of patient care within the California healthcare system. The supervising physical therapist's evaluation of the physical therapist license applicant shall be prepared utilizing the Physical Therapist Clinical Performance Instrument issued by the American Physical Therapy Association in December of 1997. The certification shall include two elevations of the physical therapist license applicant's skills. One evaluation shall determine the skill level mid-way through the period of clinical service and the other evaluation shall determine the skill level at the end of the clinical service. Both evaluations shall be reported at the end of the period of clinical service.

(e) Three (3) months of the required nine (9) months of clinical service shall be waived by the board if the physical therapist license applicant successfully completes a course in Law and Professional Ethics as offered by a post-secondary educational institution or by successfully completing four (4) continuing education units in Ethics offered by a continuing education provider recognized by a California healthcare board.

(f) One (1) month of clinical service shall be waived for each month of licensed clinical practice in another state up to the required total of nine (9) months.


HISTORY

1. New section filed 5-8-2017; operative 7-1-2017 (Register 2017, No. 19).

2. Change without regulatory effect amending subsections (b), (d) and (e) filed 9-21-2015 pursuant to section 100, title 1, California Code of Regulations (Register 2015, No. 39).
§1398.28. Written Examination
(a) The uniform examination utilized by the board for the licensure of physical therapists is the Federation of State Boards of Physical Therapy's examination for physical therapists.
(b) The uniform examination utilized by the board for the licensure of physical therapist assistants is the Federation of State Boards of Physical Therapy's examination for physical therapist assistants.

HISTORY
1. Amendment filed 4-16-79; effective thirtieth day thereafter (Register 79, No. 16).
2. Repealer of subsection (c) filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
3. Amendment of subsections (a) and (b) filed 4-20-90; operative 5-20-90 (Register 90, No. 21).
4. Change without regulatory effect amending section filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
5. Amendment filed 3-8-2000; operative 4-7-2000 (Register 2000, No. 10).
7. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

Article 3: Physical Therapy Schools

§1398.30. Approved Physical Therapist Educational Programs
(a) Only those educational programs which meet the requirements set forth in Section 1398.31 shall be approved by the board for professional education in physical therapy. The executive officer shall maintain on file at the board's Sacramento office a list of approved education programs.
(b) If, at the time of graduation, the physical therapy educational program from which the applicant for licensure graduated was an approved program as set forth in Section 1398.31, the applicant's educational program shall be considered to satisfy the requirements of Section 1398.30(a).


HISTORY
1. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
2. Change without regulatory effect amending section filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
3. Amendment of section heading and section filed 3-8-2000; operative 4-7-2000 (Register 2000, No. 10).
4. Amendment of section heading and section filed 4-14-2005; operative 5-14-2005 (Register 2005, No. 15).
§1398.31. Criteria for Approval of Physical Therapy Schools
(a) Physical therapy educational programs shall be established in post-secondary educational institutions accredited by a national association or agency recognized by the Council on Post-Secondary Accreditation and/or the U.S. Department of Education.
(b) The physical therapy educational program shall be accredited by the agency or organization recognized by the Council on Post-Secondary Accreditation or the U.S. Department of Education.
(c) Teaching programs of not less than 1400 hours duration also may be established in hospitals for students whose preliminary education meets the requirements of Section 2650 of the code, providing the physical therapy education program is accredited as set forth in subsection (b).
(d) Nothing in this section shall be construed to prevent the board from approving a school or training program which is not approved or from not approving a school or training program which is approved by one of the above-mentioned entities.
HISTORY
1. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
2. Change without regulatory effect amending subsection (d) filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
3. Change without regulatory effect amending subsections (a) and (b) filed 9-21-2015 pursuant to section 100, title 1, California Code of Regulations (Register 2015, No. 39).

§1398.37. Identification and Supervision of Physical Therapist Students Defined
(a) When rendering physical therapy services as part of academic training, a physical therapy student shall only be identified as a “physical therapist student.” When rendering physical therapy services, the required identification shall be clearly visible and include his or her name and working title in at least 18-point type.
(b) The “clinical instructor” or the “supervisor” shall be the physical therapist supervising the physical therapist student while practicing physical therapy.
(c) The supervising physical therapist shall provide on-site supervision of the assigned patient care rendered by the physical therapist student.
(d) The physical therapist student shall document each treatment in the patient record, along with his or her signature. The clinical instructor or supervising physical therapist shall countersign with his or her first initial and last name all entries in the patient’s record on the same day as patient related tasks were provided by the physical therapist student.
HISTORY
1. New section filed 4-16-79; effective thirtieth day thereafter (Register 79, No. 16).
2. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
4. Change without regulatory effect amending section heading, section and Note filed 9-21-2015 pursuant to section 100, title 1, California Code of Regulations (Register 2015, No. 39).
§1398.38. **Criteria for Approval of Physical Therapy Facilities to Supervise the Clinical Service of Foreign Educated Applicants**

Pursuant to Section 2653 of the code in order to be approved as a facility in which a foreign educated applicant may complete a period of clinical service, each physical therapy facility shall complete a form entitled Clinical Site Information Form (CSIF), as developed by the American Physical Therapy Association and revised on 11-01-99, hereby incorporated by reference, certifying that the facility has the staffing, clinical experiences, and clinical instruction to provide physical therapy clinical experience for the foreign educated physical therapist applicant for licensure. The CSIF shall be submitted to the Board accompanied by the Board’s Notice of Intent to Supervise a Foreign Educated Physical Therapist”, form F1B, revised January 2005, hereby incorporated by reference. For each foreign educated applicant, both forms shall be complete and signed in order for the physical therapy facility to be approved by the Board.


**HISTORY**
1. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
2. Amendment of section heading and first paragraph filed 3-8-2000; operative 4-7-2000 (Register 2000, No. 10).

**Article 4:  Physical Therapist Assistant**

§1398.44. **Adequate Supervision Defined**

(a) “Adequate supervision” of a physical therapist assistant shall mean supervision that complies with this section. A physical therapist shall at all times be responsible for all physical therapy services provided by the physical therapist assistant and shall ensure that the physical therapist assistant does not function autonomously. The physical therapist has a continuing responsibility to follow the progress of each patient, and is responsible for determining which elements of a treatment plan may be assigned to a physical therapist assistant.

(b) A physical therapist who performs the initial evaluation of a patient shall be the physical therapist of record for that patient. The physical therapist of record shall remain as such until a reassignment of that patient to another physical therapist of record has occurred. The physical therapist of record shall ensure that a written system of transfer to the succeeding physical therapist exists.

(c) The physical therapist of record shall provide supervision and direction to the physical therapist assistant in the treatment of patients to whom the physical therapist assistant is providing care. The physical therapist assistant shall be able to identify, and communicate with, the physical therapist of record at all times during the treatment of a patient.
(d) A physical therapist assistant shall not:
(1) Perform measurement, data collection or care prior to the evaluation of the patient by the physical therapist
(2) Document patient evaluation and reevaluation
(3) Write a discharge summary
(4) Establish or change a plan of care
(5) Write progress reports to another health care professional, as distinguished from daily chart notes
(6) Be the sole physical therapy representative in any meeting with other health care professionals where the patient's plan of care is assessed or may be modified.
(7) Supervise a physical therapy aide performing patient-related tasks
(8) Provide treatment if the physical therapist assistant holds a management position in the physical therapy business where the care is being provided. For purposes of this section, “management position” shall mean a position that has control or influence over scheduling, hiring, or firing.

The prohibitions in subsection (d) above shall not prohibit a physical therapist assistant from collecting and documenting data, administering standard tests, or taking measurements related to patient status.

(e) The physical therapist assistant shall notify the physical therapist of record, document in the patient record any change in the patient's condition not within the planned progress or treatment goals, and any change in the patient's general condition.


HISTORY
1. Repealer of subsection (f) filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
2. Amendment of section and Note filed 9-18-96; operative 9-18-96 pursuant to Government Code section 11343.4(d) (Register 96, No. 38).
3. Repealer and new section filed 6-14-2011; operative 7-14-2011 (Register 2011, No. 24).
4. Change without regulatory effect amending subsection (e) and repealing subsection (e)(1) filed 9-21-2015 pursuant to section 100, title 1, California Code of Regulations (Register 2015, No. 39).
5. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

§1398.47. Equivalent Training or Experience
(a) Training and experience considered equivalent to that obtained in an approved physical therapist assistant school shall be acquired in one of the following ways:
(1) Military training, consisting of satisfactory completion of a basic hospital corps member course and of a formal physical therapist assistant course that includes a minimum of 550 hours of technical courses relating to physical therapy, and 350 hours of supervised clinical experience. In addition, the applicant shall complete the general education requirements described in subsection (c).
(2) A combination of training and 36 months of full-time work experience in physical therapy described in subsection (b). Training shall consist of satisfactory completion of 30 semester units or 40 quarter units of instruction in a variety of the following technical areas: Human anatomy
and physiology, including laboratory experience; kinesiology and topographical anatomy; first-aid; basic principles of electromagnetism, mechanics and thermodynamics, biomechanics, and massage; application of therapeutic exercise and modalities for the physically disabled; survey of pathophysiological conditions resulting from injury or disease; ethics; and laws relating to physical therapy. In addition, the applicant shall complete the general education requirements described in subsection (c). The applicant shall have obtained a grade of “c” or better in all technical coursework to be accepted for licensure as a physical therapist assistant. Eighteen (18) months of the work experience shall be in providing patient related tasks under the orders, direction and immediate supervision of a physical therapist in an acute care inpatient facility.

(3) Successful completion of professional education described in section 2650 of the code.

(b) Work experience used to satisfy subsection (a)(2) shall be obtained under the orders, direction and immediate supervision of (1) a physical therapist licensed by the board, (2) a physical therapist employed by the United States Government, or (3) an out-of-state licensed physical therapist who has qualifications equivalent to a physical therapist licensed by the board, and shall consist of assisting the supervising physical therapist in the treatment of patients of both sexes, varying ages and disabilities. Full-time work experience shall be credited on the basis of a compensated 40-hour work week, allowing for the usual and customary periods of absence. Work credit shall be given for part-time employment. The work experience shall have been obtained within ten years of the date the application for licensure is filed with the board, provided that, one-half of the experience has been obtained within five years of the application.

(c) General education requirements shall consist of satisfactory completion of 15 semester units or 20 quarter units, including at least one course in each of the following areas:

(1) Natural Sciences.
(2) Social or Behavioral Sciences.
(3) Humanities.
(4) English, Speech, or Mathematics.
(5) English Composition which meets the Associate or Baccalaureate degree requirement of the college at which the course is taken. The applicant shall have obtained a grade of “c” or better in English Composition to be accepted for licensure as a physical therapist assistant.

(d) Proof of completion of the general education courses in subsection (c) and of the technical courses in subsection (a)(2) shall be submitted on an official transcript. The courses may be taken at any post-secondary institution that is accredited by an agency recognized by the Council for Higher Education Accreditation or the U.S. Department of Education. Credit will be given for academic units granted by the educational institution for equivalent experience or education as well as for the results of equivalency or proficiency examination.


HISTORY
1. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
2. Amendment of subsection (a) filed 5-15-91; operative 6-14-91 (Register 91, No. 26).
3. Editorial correction of printing error in subsection (c)(4) (Register 91, No. 26).
4. Amendment of subsections (a)(1)-(a)(3) and (b) filed 10-21-94; operative 11-21-94 (Register 94, No. 42).
5. Change without regulatory effect amending subsection (b) filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
7. Amendment of subsections (a)(2), (b) and (c)(5) and amendment of Note filed 12-19-2002; operative 1-18-2003 (Register 2002, No. 51).
8. Change without regulatory effect repealing subsection (a)(3), renumbering subsections and amending subsection (b) filed 9-21-2015 pursuant to section 100, title 1, California Code of Regulations (Register 2015, No. 39).
9. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

Article 5: Physical Therapist Assistant Schools

§1398.50. Approved Physical Therapist Assistant Education Programs
Those education programs which meet the requirements of Section 1398.51 shall be approved by the board for the training of physical therapist assistants. The executive officer shall maintain on file at the board's office a list of approved education programs.


HISTORY
1. Repealer of Article 5 (Sections 1398.50-1398.54) and new Article 5 (Sections 1398.50 and 1398.51) filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
2. Change without regulatory effect amending section filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
3. Amendment of section heading, section and Note filed 3-8-2000; operative 4-7-2000 (Register 2000, No. 10).
4. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

§1398.51. Criteria for Approval of Physical Therapist Assistant Schools
(a) Physical therapist assistant training programs shall be established in post-secondary educational institutions accredited by a regional association recognized by the U.S. Department of Education or the Council on Post-Secondary Accreditation.
(b) The physical therapist assistant training program shall be accredited by the appropriate agency or organization recognized by the U.S. Department of Education or the Council on Post-Secondary Accreditation.


HISTORY
1. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).
§1398.52. Identification and Supervision of Physical Therapist Assistant Students Defined

(a) A physical therapist assistant student is an unlicensed person rendering physical therapy services as part of academic training pursuant to section 2650.1 of the Code and shall only be identified as a “physical therapist assistant student.” When rendering physical therapy services, the required identification shall be clearly visible and include his or her name and working title in at least 18-point type.

(b) The physical therapist assistant student shall be supervised by a physical therapist supervisor. A physical therapist assistant under the supervision of a physical therapist supervisor may perform as a clinical instructor of the physical therapist assistant student when rendering physical therapy services.

(c) A physical therapist supervisor shall provide on-site supervision of the assigned patient care rendered by the physical therapist assistant student.

(d) The physical therapist assistant student shall document each treatment in the patient record, along with his or her signature. The clinical instructor shall countersign with his or her first initial and last name in the patient's record on the same day as patient related tasks were provided by the physical therapist assistant student. The supervising physical therapist shall conduct a weekly case conference and document it in the patient record.


HISTORY

2. Change without regulatory effect amending section heading, section and Note filed 9-21-2015 pursuant to section 100, title 1, California Code of Regulations (Register 2015, No. 39).
3. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

Article 6: Physical Therapy Aides

§1399. Requirements for Use of Aides

(a) A physical therapy aide is an unlicensed person who may be utilized by a physical therapist in his or her practice by performing non-patient related tasks, or by performing patient related tasks.

(b) Prior to the aide providing patient related care, a physical therapist shall evaluate and document, the aide's competency level for performing the patient related task that the aide will provide in that setting. The record of competencies shall be made available to the board or any physical therapist utilizing that aide upon request.

(c) As used in these regulations:

1. A “patient related task” means a physical therapy service rendered directly to the patient by an aide, excluding non-patient related tasks as defined below.

2. A “non-patient related task” means a task related to observation of the patient, transport of patients, physical support only during gait or transfer, housekeeping duties, clerical duties and similar functions.

3. “Under the orders, direction and immediate supervision” means:
(A) Prior to the initiation of care, the physical therapist shall evaluate every patient prior to the performance of any patient related tasks by the aide.

(B) The physical therapist shall formulate and record in the patient's record a treatment program based upon the evaluation and any other information available to the physical therapist, and shall determine those patient related tasks which may be assigned to an aide.

(C) The physical therapist shall assign only those patient related tasks that can be safely and effectively performed by the aide. The physical therapist shall be responsible at all times for the conduct of the aide while the aide is performing “patient related tasks” and “non-patient related tasks” as defined in this section.

(D) The physical therapist shall provide continuous and immediate supervision of the aide. The physical therapist shall be in the same facility as the aide and in immediate proximity to the location where the aide is performing patient related tasks. The physical therapist shall be readily available at all times to provide immediate advice, instruction or intervention in the care of the patient. When patient related tasks are provided to a patient by an aide the physical therapist shall at some point during the treatment day provide direct service to the patient as treatment for the patient's condition or to further evaluate and monitor the patient's progress.

(E) The physical therapist shall perform periodic re-evaluation of the patient as necessary and make adjustments in the patient's treatment program. The re-evaluation shall be documented in the patient's record.

Note: Authority cited: Section 2615, Business and Professions Code. Reference: Section 2630.4, Business and Professions Code.

HISTORY
1. Amendment of subsection (b) filed 3-20-78; effective thirtieth day thereafter (Register 78, No. 12).
2. Amendment filed 8-13-81; effective thirtieth day thereafter (Register 81, No. 33).
3. Amendment of subsections (b)(1), (b)(2), (b)(4) and (b)(5) and new subsection (b)(6) filed 10-21-94; operative 11-21-94 (Register 94, No. 42).
4. Amendment filed 6-14-2011; operative 7-14-2011 (Register 2011, No. 24).
5. Change without regulatory effect amending Note filed 9-21-2015 pursuant to section 100, title 1, California Code of Regulations (Register 2015, No. 39).
6. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

Article 7: Practice by Applicants

§1399.10. Supervision of Physical Therapist License Applicants

Pursuant to Section 2639 of the code, a physical therapist license applicant whose application for licensure has been filed and reviewed by the board may perform as a physical therapist if he or she is under the direct and immediate supervision of a physical therapist licensed by the board. “Direct and immediate supervision” means a supervisor shall at all times be responsible for and provide adequate supervision of the work performed by the physical therapist license applicant and shall be in close proximity to the location where the physical therapist license applicant is rendering physical therapy treatment. The physical therapist license applicant shall document each treatment in the patient record, along with his or her signature. A supervising physical
A supervising physical therapist shall countersign with his or her first initial and last name in the patient's record on the same day as patient related tasks were provided by the physical therapist license applicant. A supervising physical therapist shall document receipt of the letter authorizing physical therapist license applicant status and record the expiration date of such status in the employee record. A supervising physical therapist shall require the applicant to provide documentation of the license issued at the conclusion of the physical therapist license applicant status. If the applicant fails to pass the licensing examination all privileges to work as a physical therapist license applicant shall terminate.

Authorizing the physical therapist license applicant to work after the conclusion of physical therapist applicant status constitutes unprofessional conduct.


HISTORY
1. Amendment filed 3-20-78; effective thirtieth day thereafter (Register 78, No. 12).
2. Amendment filed 10-19-83; effective thirtieth day thereafter (Register 83, No. 43).
3. Change without regulatory effect amending section filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
4. Amendment of section heading and section filed 3-8-2000; operative 4-7-2000 (Register 2000, No. 10).

§1399.12. Supervision of Physical Therapist Assistant License Applicants

Pursuant to Section 2655.91 of the code, a physical therapist assistant license applicant whose application for license has been filed and reviewed by the board may assist in the provision of physical therapy services if he or she is under the direct and immediate supervision of a physical therapist licensed by the board. “Direct and immediate” means a supervisor shall at all times be responsible for and provide adequate supervision of the work performed by the applicant and shall be in close proximity to the location where the applicant is assisting in the provision of physical therapy treatment. The physical therapist assistant license applicant shall document each treatment in the patient record, along with his or her signature. A supervising physical therapist shall countersign with his or her first initial and last name in the patient's record on the same day as patient related tasks were provided by the physical therapist assistant license applicant. A supervising physical therapist will conduct a weekly case conference and document it in the patient record.

A supervising physical therapist shall document receipt of the letter authorizing physical therapist assistant license applicant status and record the expiration date of such status in the employee record. A supervising physical therapist shall require the applicant to provide documentation of the license issued at the conclusion of the physical therapist assistant license applicant status. If the applicant fails to pass the licensing examination all privileges to work as a physical therapist assistant license applicant shall terminate.

Authorizing the physical therapist assistant license applicant to work after the conclusion of physical therapist assistant license applicant status constitutes unprofessional conduct.

 Article 8: Enforcement Actions, Discipline, and Reinstatement of License

§1399.15. Guidelines for Issuing Citations and Imposing Discipline
(a) In reaching a decision on a disciplinary action under the Administrative Procedure Act (Government Code Section 11400 et seq.), the Board shall consider the “Guidelines for Issuing Citations and Imposing Discipline”, (Revised December 2013, 5th Edition; hereafter, “Guidelines”) which are hereby incorporated by reference. Subject to paragraph (c), deviation from these guidelines and orders, including the standard terms of probation, is appropriate where the Board, in its sole discretion, determines that the facts warrant such a deviation—for example: The presence of mitigating or aggravating factors; the age of the case; evidentiary problems.

(b) Notwithstanding the Guidelines, any proposed decision issued in accordance with the procedures set forth in Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code that contains any finding of fact that the licensee engaged in any act of sexual contact, as defined in subdivision (c) of Section 729 of the Code, with a patient, or any finding that the licensee has committed a sex offense or been convicted of a sex offense, shall contain an order revoking the license. The proposed decision shall not contain an order staying the revocation of the license.

As used in this section, the term “sex offense” shall mean any of the following:
(1) Any offense for which registration is required by Section 290 of the Penal Code or a finding that a person committed such an offense.
(2) Any offense defined in Section 261.5, 313.1, 647b, or 647 subdivisions (a) or (d) of the Penal Code or a finding that a person committed such an offense.
(3) Any attempt to commit any of the offenses specified in this section.
(4) Any offense committed or attempted in any other state or against the laws of the United States which, if committed or attempted in this state, would be punishable as one or more of the offenses specified in this section.
(c) If the conduct found to be a violation involves drugs, alcohol, or both, and the individual is permitted to practice under conditions of probation, a clinical diagnostic evaluation shall be ordered as a condition of probation in every case, without deviation.
(1) Each of the “Conditions Applying the Uniform Standards,” as set forth in the Guidelines, shall be included in any order subject to this subsection, but may be imposed contingent upon the outcome of the clinical diagnostic evaluation.

(2) The Substance Abuse Coordination Committee’s “Uniform Standards Regarding Substance-Abusing Healing Arts Licensees” (Revised April 2011; hereafter, “Uniform Standards”), which are hereby incorporated by reference, shall be used in applying the probationary conditions imposed pursuant to this subsection.

(d) Nothing in this section shall prohibit the Board from imposing additional terms or conditions of probation in any order that the Board determines would provide greater public protection.

Note: Authority cited: Section 2615, Business and Professions Code. Reference: Sections 315, 315.2, 315.4, 2660, 2660.1, 2661 and 2661.5, Business and Professions Code; and Section 11425.50(e), Government Code.

HISTORY
1. New section filed 6-25-97; operative 7-1-97 pursuant to Government Code section 11343.4(d) (Register 97, No. 26).
4. Amendment of section and Note filed 1-22-2013; operative 4-1-2013 (Register 2013, No. 4).
5. Amendment of section and Note filed 7-30-2014; operative 10-1-2014 (Register 2014, No. 31).
6. Change without regulatory effect relocating and amending article 8 heading from preceding section 1399.20 to preceding section 1399.15 filed 9-21-2015 pursuant to section 100, title 1, California Code of Regulations (Register 2015, No. 39).

§1399.16. Issuance of Initial Probationary License
(a) The authority to issue an initial probationary license is delegated to the executive officer of the Board. In the absence of the executive officer the authority is delegated to the board president or in his or her absence the vice-president.

(b) When the executive officer finds that the issuance of an initial probationary license is necessary in accordance with section 2660.2 of the Act, the Board's Disciplinary Guidelines specified in section 1399.15 of these regulations shall serve as guidelines for the terms and conditions of an initial probationary license.


HISTORY
1. New section filed 10-8-2004; operative 11-7-2004 (Register 2004, No. 41).

§1399.20. Substantial Relationship Criteria
For the purposes of denial, suspension, or revocation of a license, pursuant to Division 1.5 (commencing with Section 475) of the code, a crime or act shall be considered to be substantially related to the qualifications, functions or duties of a person holding a license under the Physical Therapy Practice Act if to a substantial degree it evidences present or potential unfitness of a
person to perform the functions authorized by the license in a manner consistent with the public health, safety or welfare. Such crimes or acts shall include but not be limited to the following:

(a) Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate any provision or term of the Physical Therapy Practice Act.

(b) Conviction of a crime involving fiscal dishonesty arising out of or in connection with the practice of physical therapy.

(c) Violating or attempting to violate any provision or term of the Medical Practice Act.

Note: Authority cited: Sections 481 and 2615, Business and Professions Code. Reference: Sections 481, 2660 and 2661, Business and Professions Code.

**HISTORY**

1. Repealer of NOTE and new NOTE filed 4-16-79; effective thirtieth day thereafter (Register 79, No. 16).

2. Amendment of Article 8 heading and section filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).


4. Change without regulatory effect relocating article 8 heading from preceding section 1399.20 to preceding section 1399.15 filed 9-21-2015 pursuant to section 100, title 1, California Code of Regulations (Register 2015, No. 39).

§1399.21. Rehabilitation Criteria for Denial and Reinstatement of Licensure

When considering the denial of a license, under Section 480 of the code or a petition for reinstatement under Section 11522 of the Government Code, the board, in evaluating the rehabilitation of the applicant and his or her present eligibility for a license shall consider the following criteria:

(a) The nature and severity of the act(s) or crime(s) under consideration as grounds for denial.

(b) Evidence of any act(s) or crime(s) committed subsequent to the act(s) or crime(s) under consideration as grounds for denial which also could be considered as grounds for denial under Section 480.

(c) The time that has elapsed since commission of the act(s) or crime(s) referred to in subsections (a) or (b).

(d) The extent to which the applicant has complied with any terms of parole, probation, restitution or any other sanctions lawfully imposed against the applicant.

(e) Evidence, if any, of rehabilitation submitted by the applicant.

Note: Authority cited: Sections 482 and 2615, Business and Professions Code. Reference: Sections 482, 2660 and 2661, Business and Professions Code.

**HISTORY**

1. Amendment of NOTE filed 4-16-79; effective thirtieth day thereafter (Register 79, No. 16).

2. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).

3. Change without regulatory effect amending first paragraph filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).

§1399.22. Rehabilitation Criteria for Suspensions and Revocations

When considering the suspension or revocation of a license on the ground that a person holding a license under the Physical Therapy Practice Act has been convicted of a crime, the board in evaluating the rehabilitation of such person and his or her eligibility for a license shall consider the following criteria:

(a) The nature and severity of the act(s) or offense(s).
(b) The total criminal record.
(c) The time that has elapsed since commission of the act(s) or offense(s).
(d) Whether the licensee has complied with any terms of parole, probation, restitution or any other sanctions lawfully imposed against such person.
(e) If applicable, evidence of expungement proceedings pursuant to Section 1203.4 of the Penal Code.
(f) Evidence, if any, of rehabilitation submitted by the licensee.

Note: Authority cited: Sections 482 and 2615, Business and Professions Code. Reference: Sections 482, 2660 and 2661, Business and Professions Code.

HISTORY
1. Amendment of NOTE filed 4-16-79; effective thirtieth day thereafter (Register 79, No. 16).
2. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
3. Change without regulatory effect amending first paragraph filed 9-29-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
4. Amendment of first paragraph and subsections (d) and (f) filed 12-19-2002; operative 1-18-2003 (Register 2002, No. 51).

§1399.23. Required Actions Against Registered Sex Offenders

(a) Except as otherwise provided, if an individual is required to register as a sex offender pursuant to Section 290 of the Penal Code, or the equivalent in another state or territory, or military or federal law, the Administrative Law Judge shall, in a Proposed Decision:

(1) Promptly revoke the license of the individual, in accordance with the procedures set forth in Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and not stay the revocation nor place the license on probation.
(2) Not reinstate or reissue the individual's license.

(b) This section shall not apply to any of the following:

(1) An individual who has been relieved under Section 290.5 of the Penal Code of his or her duty to register as a sex offender, or whose duty to register has otherwise been formally terminated under California law or the law of the jurisdiction that required registration, provided, however, that nothing in this paragraph shall prohibit the board from exercising its discretion to discipline a licensee under any other provision of state law.
(2) An individual who is required to register as a sex offender pursuant to Section 290 of the Penal Code solely because of a misdemeanor conviction under Section 314 of the Penal Code; provided, however, that nothing in this paragraph shall prohibit the board from exercising its discretion to discipline a licensee under any other provision of state law based upon the licensee's conviction under section 314 of the Penal Code.

(c) Any administrative proceeding that is fully adjudicated prior to the effective date of this regulation shall not be subject to the provisions of this section. A petition for reinstatement of a
revoked or surrendered license shall be considered a new proceeding for purposes of this paragraph, and the prohibition in subdivision (a) against reinstating a license shall govern. Note: Authority cited: Section 2615, Business and Professions Code. Reference: Sections 2602, 2608, 2660, 2660.1, 2660.2, 2660.5 and 2661, Business and Professions Code. HISTORY 1. New section filed 7-17-2012; operative 8-16-2012 (Register 2012, No. 29). 2. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

§1399.24. Unprofessional Conduct
In addition to the conduct described in Section 2660 of the Code, “unprofessional conduct” also includes but is not limited to the following:
(a) Including or permitting to be included any of the following provisions in an agreement to settle a civil dispute arising from the licensee’s practice, whether the agreement is made before or after the filing of an action:
(1) A provision that prohibits another party to the dispute from contacting, cooperating, or filing a complaint with the board.
(2) A provision that requires another party to the dispute to withdraw a complaint the party has filed with the board.
(3) A provision that prohibits a party from disclosing the nature of the settlement or the amount of the settlement or otherwise declares that the settlement is “confidential.”
(b) Failure to provide to the board, as directed, lawfully requested certified copies of documents within 15 days of receipt of the request or within the time specified in the request, whichever is later, unless the licensee is unable to provide the certified documents within this time period for good cause, including but not limited to, physical inability to access the records in the time allowed due to illness or travel. This subdivision shall not apply to a licensee who does not have access to, and control over, medical records.
(c) Failure to cooperate and participate in any board investigation pending against the licensee. This subdivision shall not be construed to deprive a licensee of any privilege guaranteed by the Fifth Amendment to the Constitution of the United States, or any other constitutional or statutory privileges. This subdivision shall not be construed to require a licensee to cooperate with a request that would require the licensee to waive any constitutional or statutory privilege or to comply with a request for information or other matters within an unreasonable period of time in light of the time constraints of the licensee’s practice. Any exercise by a licensee of any constitutional or statutory privilege shall not be used against the licensee in a regulatory or disciplinary proceeding against the licensee.
(d) Failure to report to the board within 30 days any of the following:
(1) The bringing of an indictment or information charging a felony against the licensee.
(2) The arrest of the licensee.
(3) The conviction of the licensee, including any verdict of guilty, or pleas of guilty or no contest, of any felony or misdemeanor.
(4) Any disciplinary action taken by another licensing entity or authority of this state or of another state or an agency of the federal government or the United States military.
(5) Any report required to be made pursuant to Business and Professions Code section 802 regarding settlements, judgments, or arbitration awards.
(e) Failure or refusal to comply with a court order, issued in the enforcement of a subpoena, mandating the release of records to the board.
Note: Authority cited: Section 2615, Business and Professions Code. Reference: Sections 2602, 2660, 2660.2 and 2660.4, Business and Professions Code.

HISTORY
1. New section filed 7-17-2012; operative 8-16-2012 (Register 2012, No. 29).
2. Change without regulatory effect amending Note filed 9-21-2015 pursuant to section 100, title 1, California Code of Regulations (Register 2015, No. 39).

Article 8.5: Administrative Citations

§1399.25. Administrative Citations
(a) The executive officer of the board is authorized to determine when and against whom a citation will be issued. A citation may contain an administrative fine, an order of abatement, or both. A citation may be issued for violations by a licensed physical therapist or physical therapist assistant of any of the following:
(1) The Physical Therapy Practice Act (Business and Professions Code section 2600 et seq.).
(2) A regulation adopted by the board.
(3) Other statutes or regulations for which the board has authority to issue a citation.
(b) Each citation shall be in writing and shall describe with particularity the nature and facts of the violation, including a reference to the statute alleged to have been violated. The citation shall be served upon the individual in the manner authorized pursuant to Business and Professions Code section 124.
(c) Except as provided in subdivision (d), if an administrative fine is included in the citation, the fine for a violation shall not be less than $100 and shall not exceed $2,500. The following factors shall be considered when determining the amount of an administrative fine:
(1) The good or bad faith of the cited person.
(2) The nature and severity of the violation.
(3) Evidence that the violation was willful.
(4) History of the violations of the same or similar nature.
(5) The extent to which the cited person has cooperated with the board.
(6) The extent to which the cited person has mitigated or attempted to mitigate any danger or injury caused by his or her violation.
(d) A citation may include an administrative fine of up to $5,000 if the board determines that at least one of the following circumstances apply:
(1) The citation involves a violation that presents an immediate threat to the health and safety of another person.
(2) The citation involves multiple violations of the Physical Therapy Practice Act or these regulations that demonstrate a willful disregard of the law.
(3) The citation involves a violation or violations perpetrated against a senior citizen or disabled person.
(4) The cited person has a history of two or more prior citations of the same or similar violations.
Every citation issued pursuant to this article shall be disclosed to an inquiring member of the public. However, a citation shall be destroyed from all licensee records five (5) years from the date of issuance or, if one or more subsequent citations is issued within that five (5) year period, five (5) years from the date the last citation was issued. A citation that has been withdrawn or dismissed shall be destroyed from all licensee records immediately upon being withdrawn or dismissed.

Note: Authority cited: Sections 125.9 and 2615, Business and Professions Code. Reference: Section 125.9, Business and Professions Code.

HISTORY
1. New section filed 4-25-90; operative 5-25-90 (Register 90, No. 21).
2. Amendment of section heading filed 6-25-97; operative 7-25-97 (Register 97, No. 26).
3. Change without regulatory effect amending subsection (a) filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
4. New subsection (c) and amendment of Note filed 12-24-2002; operative 1-23-2003 (Register 2002, No. 52).
5. Amendment of subsection (c) filed 3-13-2006; operative 4-12-2006 (Register 2006, No. 11).
6. New article 8.5 heading and amendment of section filed 12-9-2008; operative 1-8-2009 (Register 2008, No. 50).

§1399.27. Compliance with Orders of Abatement
(a) If a cited person who has been issued an order of abatement is unable to complete the correction within the time set forth in the citation because of conditions beyond his or her control after the exercise of reasonable diligence, the person cited may request an extension of time from the executive officer in which to complete the correction. Such a request shall be in writing and shall be made within the time set forth for abatement.
(b) When an order of abatement is not contested or if the order is appealed and the person cited does not prevail, failure to abate the violation charged within the time allowed shall constitute a violation and failure to comply with the order of abatement. An order of abatement shall either be personally served or mailed by certified mail, return receipt requested. The time allowed for the abatement of a violation shall begin when the order of abatement is final and has been served or received. Such failure may result in disciplinary action being taken by the board or other appropriate judicial relief being taken against the person cited.
Note: Authority cited: Sections 125.9 and 2615, Business and Professions Code. Reference: Section 125.9, Business and Professions Code.

HISTORY
1. New section filed 4-25-90; operative 5-25-90 (Register 90, No. 21).

§1399.28. Citations for Unlicensed Practice
The executive officer of the board is authorized to determine when and against whom a citation will be issued and to issue citations containing orders of abatement and fines against persons, partnerships, corporations or associations who are performing or who have performed services for which licensure as a physical therapist or physical therapist assistant is required under the Physical Therapy Practice Act. Each citation issued shall contain an order of abatement. Where
appropriate, the executive officer shall levy a fine for such unlicensed activity in accordance with subdivision (b)(3) of section 125.9 of the code. The provisions of sections 1399.25 and 1399.27 shall apply to the issuance of citations for unlicensed activity under this subsection. The sanction authorized under this section shall be separate from and in addition to any other civil or criminal remedies.

Note: Authority cited: Sections 125.9, 148 and 2615, Business and Professions Code. Reference: Sections 125.9 and 148, Business and Professions Code.

HISTORY
1. New section filed 4-25-90; operative 5-25-90 (Register 90, No. 21).
2. Change without regulatory effect amending section filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).

§1399.29. Contest of Citations
(a) In addition to requesting a hearing as provided for in subdivision (b)(4) of section 125.9 of the code, the person cited may, within ten (10) days after service or receipt of the citation, notify the executive officer in writing of his or her request for an informal conference with the executive officer regarding the acts charged in the citation. The time allowed for the request shall begin the first day after the citation has been served or received.

(b) The executive officer shall hold, within 30 days from the receipt of the request, an informal conference with the person cited or his or her legal counsel or authorized representative. At the conclusion of the informal conference the executive officer may affirm, modify or dismiss the citation, including any fine levied or order of abatement issued. The executive officer shall state in writing the reasons for his or her action and serve or mail, as provided in subsection (b) of section 1399.27, a copy of his or her findings and decision to the person cited within ten days from the date of the informal conference. This decision shall be deemed to be a final order with regard to the citation issued, including the fine levied and the order of abatement.

(c) The person cited does not waive his or her request for a hearing to contest a citation by requesting an informal conference after which the citation is affirmed by the executive officer. If the citation is dismissed after the informal conference, the request for a hearing on the matter of the citation shall be deemed to be withdrawn. If the citation, including any fine levied or order of abatement, is modified, the citation originally issued shall be considered withdrawn and new citation issued. If a hearing is requested for the subsequent citation, it shall be requested within 30 days in accordance with subdivision (b)(4) of section 125.9 of the code.

Note: Authority cited: Sections 125.9 and 2615, Business and Professions Code. Reference: Section 125.9, Business and Professions Code.

HISTORY
1. New section filed 4-25-90; operative 5-25-90 (Register 90, No. 21).
Article 9: Physical Therapy Professional Corporations

§1399.30. Citation
These regulations may be cited and referred to as “Physical Therapy Professional Corporation Regulations.”
Note: Authority and reference cited: Sections 2615 and 2696, Business and Professions Code; and Section 13410, Corporations Code.
HISTORY
1. New Article 9. (Sections 1399.30-1399.41) filed 8-31-77; effective thirtieth day thereafter (Register 77, No. 36).
2. Amendment filed 8-13-81; effective thirtieth day thereafter (Register 81, No. 33).
3. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).

§1399.35. Requirements for Professional Corporations
A professional corporation shall comply with the following provisions:
(a) The corporation is organized and exists pursuant to the general corporation law and is a professional corporation within the meaning of Moscone-Knox Professional Corporations Act (Section 13400 et seq. of the Corporations Code).
(b) Each shareholder, director and officer (except as provided in Section 13403 of the Corporations Code and Section 2694 of the code) holds a valid physical therapist license. A physical therapist may be a shareholder in more than one professional corporation.
(c) Each professional employee of the corporation who will practice physical therapy, whether or not a director, officer or shareholder, holds a valid physical therapist license.
Note: Authority cited: Sections 2615 and 2696, Business and Professions Code. Reference: Sections 2690 and 2694, Business and Professions Code; and Sections 13401, 13403, 13404, 13405, 13406 and 13407, Corporations Code.
HISTORY
1. Amendment filed 8-13-81; effective thirtieth day thereafter (Register 81, No. 33).
2. Amendment filed 10-19-83; effective thirtieth day thereafter (Register 83, No. 43).

§1399.37. Shares: Ownership and Transfer
(a) Where there are two or more shareholders in a professional corporation and one of the shareholders:
(1) Dies; or
(2) Becomes a disqualified person as defined in Section 13401(d) of the Corporations Code for a period exceeding ninety (90) days, his or her shares shall be sold and transferred to the corporation, its shareholders or other eligible licensed persons on such terms as are agreed upon. Such sale or transfer shall not be later than six (6) months after any such death and not later than ninety (90) days after the date the shareholder becomes a disqualified person. The requirements of this subsection shall be set forth in the professional corporation's articles of incorporation or bylaws.
(b) A corporation and its shareholders may, but need not, agree that shares sold to it by a person who becomes a disqualified person may be resold to such person if and when he or she again becomes an eligible shareholder.
(c) The share certificates of a professional corporation shall contain an appropriate legend setting forth the restrictions of subsection (b), where applicable.
(d) Nothing in these regulations shall be construed to prohibit a professional corporation from owning shares in a nonprofessional corporation.

Note: Authority cited: Section 2696, Business and Professions Code. Reference: Section 2696, Business and Professions Code; and Sections 13401, 13403, 13406 and 13407, Corporations Code.

HISTORY
1. Amendment of subsection (f) filed 8-13-81; effective thirtieth day thereafter (Register 81, No. 33).
2. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).

§1399.39. Corporate Activates
(a) A professional corporation may perform any act authorized in its articles of incorporation or bylaws so long as that act is not in conflict with or prohibited by these regulations, the Physical Therapy Practice Act or the regulations adopted pursuant thereto.
(b) A professional corporation may enter into partnership agreements with other physical therapists practicing individually or in a group or with other physical therapy professional corporations.

Note: Authority cited: Section 2696, Business and Professions Code. Reference: Section 2696, Business and Professions Code; and Sections 13403, 13408 and 13410, Corporations Code.

HISTORY
1. Amendment of subsection (a) filed 8-13-81; effective thirtieth day thereafter (Register 81, No. 33).

§1399.40. Trusts
The restrictions on the ownership of the shares of professional corporations shall apply to both the legal and equitable title to such shares.


HISTORY
1. Amendment filed 8-13-81; effective thirtieth day thereafter (Register 81, No. 33).

Article 10: Fees

§1399.50. Physical Therapist Fees
Pursuant to section 2688 of the code physical therapist fees are fixed as follows:
(a) The application fee shall be $125.00. For applications electronically submitted or postmarked on or after January 1, 2016, the application fee shall be $300.
(b) The application fee for foreign graduates under section 2653 of the code shall be $200.00. For applications electronically submitted or postmarked on or after January 1, 2016, the application fee for foreign graduates under section 2653 shall be $300.00.
(c) The initial license fee shall be $100.00. For those initial license fees electronically submitted or postmarked on or after January 1, 2016 the initial license fee shall be $150.00.
(d) The biennial renewal fee shall be $200.00. For licenses that expire on or after January 1, 2016, the biennial renewal fee shall be $300.00.
(e) The delinquency fee shall be $100.00. For those delinquent after January 1, 2016 the delinquency fee shall be $150.00.


HISTORY

§1399.52. Physical Therapist Assistant Fees
Pursuant to section 2688 of the code physical therapist assistant fees are fixed as follows:
(a) The application and initial license fee shall be $125.00. For application and initial license fees electronically submitted or postmarked on or after January 1, 2016, the application and initial license fee shall be $300.00.
(b) The application and initial license fee for foreign graduates under section 2653 of the code shall be $200.00. For the application and initial license fee electronically submitted or postmarked on or after January 1, 2016, the application and initial license fee for foreign graduates under section 2653 shall be $300.00.
(c) The biennial renewal fee shall be $200.00. For licenses that expire on or after January 1, 2016, the biennial renewal fee shall be $300.00.
(d) The delinquency fee shall be $150.00.


HISTORY

§1399.54. Electromyography Certification Fees
Pursuant to section 2689 of the code, fees for physical therapists certified to perform electromyography are fixed as follows:
(a) The application fee shall be $100.00.
(b) The biennial renewal fee shall be $50.00.


HISTORY
1. New section filed 11-17-78; effective thirtieth day thereafter (Register 78, No. 46).
2. Amendment filed 8-2-79; effective thirtieth day thereafter (Register 79, No. 31).
3. Amendment filed 12-17-80; effective thirtieth day thereafter (Register 80, No. 51).
4. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
5. Amendment of subsection (a) filed 5-15-91; operative 6-14-91 (Register 91, No. 26).
Article 11: Electromyography Certification

§1399.60. Definitions
As used in these regulations:
(a) “Electroneuromyography” means the performance of tissue penetration for the purpose of evaluating neuromuscular performance, and includes the evaluation of specific abnormal potentials and evoked responses.
(b) “Kinesiological electromyography” means the study, including tissue penetration, of the phasic activity of individual or multiple muscles in relation to another physical or physiological event or exercise and does not include the evaluation of specific abnormal potentials or evoked responses.


HISTORY
1. New Article 11 (Sections 1399.60-1399.69, not consecutive) filed 11-17-78; effective thirtieth day thereafter (Register 78, No. 46).
2. Amendment of NOTE filed 4-16-79; effective thirtieth day thereafter (Register 79, No. 16).
3. Amendment filed 12-17-80; effective thirtieth day thereafter (Register 80, No. 51).
4. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).

§1399.61. Certification Required
(a) No physical therapist shall perform tissue penetration for the purpose of making an electromyographical evaluation unless he or she is certified by the board to perform such tests or such practice is appropriately supervised pursuant to Sections 1399.63 or 1399.64 in order to meet the experience requirements for examination by the board for certification.
(b) No physical therapist who is certified to perform kinesiological electromyography shall perform electroneuromyographical evaluations without additional authorization from the board as indicated on his or her certification.
(c) No physical therapist who is certified to perform electroneuromyographical evaluations shall perform kinesiological electromyography without additional authorization from the board as indicated on his or her certification.


HISTORY
1. Amendment filed 12-17-80; effective thirtieth day thereafter (Register 80, No. 51).
2. New subsection (c) filed 8-29-94; operative 9-28-94 (Register 94, No. 35).
3. Change without regulatory effect amending section filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).

§1399.62. Application Required
All applications for certification by the board in electromyography shall be on a form provided by the board which is accompanied by whatever documentation is required therein and the certification fee required in Section 1399.54 of these regulations.
§1399.63. Requirements for Kinesiological Electromyography Certification

In order to be examined by the board for certification in kinesiological electromyography an applicant shall meet the following requirements:

(a) Licensure. Be licensed as a physical therapist by the board.

(b) Training in Tissue Penetration. Provide evidence of training under a licensed physician or a physical therapist certified to perform electromyography, in tissue penetration for the purpose of evaluation of muscular or neuromuscular performance which shall include instruction and demonstrations in:

(1) Pertinent anatomy and physiology,
(2) Choice of equipment,
(3) Proper technique,
(4) Hazards and complications,
(5) Post test care, and
(6) Satisfactory performance by the trainee in the technical skills of tissue penetration.

Such training may be completed as part of the coursework obtained under subsection (c)(1) below.

(c) Education. Provide evidence of one of the following educational requirements:

(1) Completion of regular or extension coursework pertinent to electromyography obtained in a public university or state college or in a private postsecondary educational institution which is accredited or approved under Section 94310 of the Education Code for which academic credit is awarded or continuing education coursework, which is acceptable to the board. The curriculum vitae of the instructor, course outline, course objectives and evaluation mechanism of any extension or continuing education coursework which is presented by the applicant as meeting the requirements of this section shall be forwarded to the board upon request. Such coursework in order to qualify the applicant for certification shall include instruction in the following subject areas:

(A) Gross anatomy - the muscular system of the body with emphasis on the structural and cross sectional relationships.
(B) Neuroanatomy - organization and functional features of the central and peripheral nervous system.
(C) Nerve and muscle physiology - bioelectric currents and their characteristic wave forms and conduction over peripheral nerves.

(2) Completion of a period of self-study which prepares the applicant to pass an examination for certification in kinesiological electromyography. Evidence and documentation shall include a summarization of what matters were contained in the self-study including the applicant's clinical
exposure to electromyography and any materials studied on that subject and the names and statements, of any proctors who may have supervised the applicant in electromyography;
(3) Authorization to perform electromyography issued by another state with similar requirements.
(d) Experience. Provide evidence of the following experience requirements:
(1) Completion of not less than 200 clock hours in kinesiological electromyography satisfactory to the board which provides a progressive level of training under a physical therapist certified in kinesiological electromyography in this state or another state which has similar requirements for certification, or under a licensed physician who is similarly qualified to perform and who performs kinesiological electromyography as part of his or her practice of medicine who is approved by the board.
(2) Documentation of completion of 50 kinesiological electromyographic examinations.

**HISTORY**
1. New section filed 12-17-80; effective thirtieth day thereafter (Register 80, No. 51).
2. Amendment of subsections (c)(2) and (d)(2) filed 12-31-81; effective thirtieth day thereafter (Register 82, No. 1).
3. Amendment of subsections (c)(2) and (d)(2) filed 5-20-85; effective thirtieth day thereafter (Register 85, No. 21).
4. Amendment of subsections (b) and (d)-(d)(1), repealer of designation of subsections (d)(1)(A)-(C), repealer of subsection (d)(1)(B), repealer of designation of subsection (d)(2)(A) and repealer of subsections (d)(2)(B)-(C) filed 8-29-94; operative 9-28-94 (Register 94, No. 35).
5. Change without regulatory effect amending first paragraph and subsections (c)(1) and (d)(1) filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).

§1399.64. Requirements for Electroneuromyography Authorization
In order to be examined by the board for additional authorization to perform electroneuromyographical examinations an applicant shall meet the following requirements:
(a) Comply with Section 1399.63, subsections (a) and (b).
(b) Education. Provide evidence of one of the following education requirements:
(1) In addition to that coursework required in Section 1399.63, subsection (c)(1), completion of the following additional coursework which meets the requirements of that section in the following subject areas:
(A) Neuroanatomy which also emphasizes the course of peripheral nerves and patterns of innervation.
(B) Clinical neurology, myology and pathology - identification of clinical characteristics of neurogenic and myogenic disorders.
(C) Physical science of electroneuromyography - basic electrophysiology and the identification and recording of bioelectric signals.
(D) Clinical science of electroneuromyography - knowledge and procedures of patient evaluation and examination, including electromyographic and nerve conduction velocity studies, and training in tissue penetration.
(2) Completion of a period of self-study which prepares the applicant to pass a supplemental examination for additional certification to perform electroneuromyographical examination. Evidence and documentation shall include a summarization of what matters were contained in the self-study including the applicant’s clinical exposure to electroneuromyography and any materials studied on that subject and the name and statements, of any proctors who may have supervised the applicant in electroneuromyography.

(3) Authorization to perform electroneuromyographical examinations issued by another state with similar requirements.

(c) Experience. Provide evidence of the following experience requirements:

(1) Completion of not less than 400 clock hours in electroneuromyography, satisfactory to the board which provides a progressive level of training under (A) a physical therapist authorized to perform electroneuromyography, in this state or, (B) under a licensed physical therapist in another state which has similar requirements for certification, who is authorized to perform electroneuromyography or who is certified by the American Board of Physical Therapy Specialists as an electrophysiological clinical specialist, or (C) under a licensed physician who is similarly qualified to perform and who performs electroneuromyography, as part of his or her practice of medicine.

(2) Documentation of completion of 200 electroneuromyographic examinations.


HISTORY

1. Repealer and new section filed 12-17-80; effective thirtieth day thereafter (Register 80, No. 51).

2. Amendment of subsections (b)(2) and (c)(2) filed 12-31-81; effective thirtieth day thereafter (Register 82, No. 1).

3. Amendment of subsection (c)(1) filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).

4. Amendment of subsections (b)(2) and (c)(2) filed 5-20-85; effective thirtieth day thereafter (Register 85, No. 21).

5. Amendment of subsections (c)-(c)(1), repealer of designation of subsections (c)(1)(A)-(B) with textual amendments, repealer of designation of subsection (d)(2)(A) with textual amendment and repealer of subsection (d)(2)(B) filed 8-29-94; operative 9-28-94 (Register 94, No. 35).

6. Change without regulatory effect amending first paragraph and subsection (c)(1) filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).

§1399.65. Examination Required

(a) All physical therapists applying for certification to perform kinesiological electromyography shall take and pass the examination referred to in Section 1399.66, which will be administered by the board.

(b) All physical therapists applying for certification to perform electroneuromyography shall take and pass the examination referred to in Section 1399.67, which will be administered by the board.

§1399.66. Examination Subject Areas – Kinesiological Electromyography
The examination for certification in kinesiological electromyography shall test applicants in the following subject areas:
(a) Basic science as related to kinesiological electromyography:
(1) Anatomy
(2) Electrophysiology
(b) Clinical science as related to kinesiological electromyography:
(1) Pre-examination patient evaluation
(2) Instrumentation
(3) Kinesiological examination procedure and process.
(c) Practical application of kinesiological electromyography:
(1) Needle/wire examination of muscles
(2) Handling of equipment
(3) Patient preparation and management
(4) Data collection, presentation and summarization.

§1399.67. Examination Subject Areas – Electroneuromyography
The examination for certification in electroneuromyography shall test applicants in the following subject areas:
(a) Basic science as related to electroneuromyography:
(1) Anatomy
(2) Electrophysiology
(3) Neuromuscular pathology.
(b) Clinical science as related to electroneuromyography:
(1) Instrumentation
(2) Pre-examination patient evaluation
(3) Examination procedure and process
(4) Interpretation and recording of examination records and data.
(c) Practical application of electroneuromyography:
(1) Needle examination of muscles
(2) Motor and sensory nerve conduction velocity examinations.
(3) Handling of equipment
(4) Patient preparation and management
(5) Data collection, presentation and summarization.

HISTORY
1. New section filed 12-17-80; effective thirtieth day thereafter (Register 80, No. 51).
2. Amendment filed 8-29-94; operative 9-28-94 (Register 94, No. 35).

§1399.68. Certification Renewal
All certificates to perform electromyography shall be renewed concurrently with each holder's physical therapist license.

HISTORY
1. Amendment filed 12-17-80; effective thirtieth day thereafter (Register 80, No. 51).
2. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
3. Change without regulatory effect amending section filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
4. Amendment filed 3-8-2000; operative 4-7-2000 (Register 2000, No. 10).

§1399.69. Suspension of Revocation of Certificates
(a) Any certificate to perform electromyography may be suspended or revoked or have probationary conditions imposed thereon by the board as directed by the board after proceedings held in accordance to the Administrative Procedure Act (Section 11500 et seq. of the Government Code) for any violation of this article, the Physical Therapy Regulations or Section 2660 of the code.
(b) It shall constitute unprofessional conduct and a violation of these rules for a physical therapist certified to perform kinesiological electromyography only to perform electroneuromyography without additional authorization obtained from the board, unless such practice is appropriately supervised pursuant to Section 1399.64 in order to meet the experience requirements for examination by the board for such additional authorization.

HISTORY
1. Amendment of NOTE filed 4-16-79; effective thirtieth day thereafter (Register 79, No. 16).
2. Amendment filed 12-17-80; effective thirtieth day thereafter (Register 80, No. 51).
3. Amendment filed 6-29-83; effective thirtieth day thereafter (Register 83, No. 27).
4. Change without regulatory effect amending section filed 9-11-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 37).
§1399.70. Electromyography Reports
The findings reported to the patient's physician shall include the following statement:
“This study has been performed in accordance with the Physical Therapy Practice Act (Chapter 5.7 of Division 2 of the Business and Professions Code) and with the Physical Therapy Regulations (Title 16, California Code of Regulations, Division 13.2). The findings in this report do not represent diagnostic interpretations or medical diagnoses. The results of the electromyographic examination by the certified electromyographer are intended for integration by the physician and surgeon with the patient's history, clinical examination, and the results of any other tests performed in establishing a medical diagnosis.”
Note: Authority cited: Sections 2615 and 2620.5, Business and Professions Code. Reference: Section 2620.5, Business and Professions Code.
HISTORY

Article 12: Topical Medications

§1399.75. Compliance with Regulations
A physical therapist may apply or administer topical medications to a patient as set forth in this article.
HISTORY
1. New Article 12 (Sections 1399.75-1399.79) filed 2-11-81; effective thirtieth day thereafter (Register 81, No. 7).

§1399.76. Topical Medications Defined
As used in this article “topical medications” means medications applied locally to the skin or underlying tissue where there is a break in or absence of the skin where such medications require a prescription or order under federal or state law.

§1399.77. Administration of Medications
Topical medications may be administered by a physical therapist by:
(a) Direct application;
(b) Iontophoresis; or
(c) Phonophoresis.

§1399.78. Authorization and Protocols Required
Topical medications shall be applied or administered by a physical therapist in accordance with this section.
(a) Any topical medication applied or administered shall be ordered on a specific or standing basis by a practitioner legally authorized to order or prescribe such medication.
(b) Written protocols shall be prepared for the administration or application of each of the groups of medications listed in Section 1399.79 for which a prescription is required under Federal or State law, which shall include a description of the medication, its actions, its indications and contraindications, and the proper procedure and technique for the application or administration of medication.


HISTORY
1. Amendment of Note filed 3-8-2000; operative 4-7-2000 (Register 2000, No. 10).

§1399.79. Authorized Topical Medications
A physical therapist may apply or administer those topical medications listed in this section in accordance with the provisions of this article:
(a) Bacteriocidal agents;
(b) Debriding agents;
(c) Topical anesthetic agents;
(d) Anti-inflammatory agents;
(e) Antispasmodic agents; and
(f) Adrenocortico-steroids.


HISTORY
1. Amendment of subsection (f) and Note filed 3-8-2000; operative 4-7-2000 (Register 2000, No. 10).

Article 13: Continuing Competency Requirements and Inactive License Status

§1399.90. Definitions
For purposes of this article, the following terms have the following meanings:
(a) “ABPTS” means the American Board of Physical Therapy Specialists.
(b) “Accredited institution” means an educational institution accredited by the United States Department of Education or by the regulatory authority of any state.
(c) “Approval agency” means an entity that reviews and approves providers of continuing education courses and is recognized by the board pursuant to section 1399.95.
(d) “Approved provider” means a person or entity that offers, sponsors or provides continuing education courses and that is either approved pursuant to section 1399.96 or is an accredited institution.
(e) “APTA” means the American Physical Therapy Association.
(f) “CPTA” means the California Physical Therapy Association.
(g) “Hour” is the unit of measurement for continuing competency and, for courses, means at least 50 minutes of instruction.
(h) “FSBPT” means the Federation of State Boards of Physical Therapy.
§1399.91. Continuing Competency Required

(a) As required by this article, a licensee must accumulate 30 hours of continuing competency hours in each license cycle. A licensee must submit evidence of completing those hours to the board in order to renew his or her license. In order to implement this requirement:

(1) For licenses that expire between October 31, 2010 and October 31, 2011, if the renewal is submitted prior to the expiration of the original license, 15 hours of continuing competency shall be completed.

(2) For licenses that expire on and after November 1, 2011, the full 30 hours shall be completed.

(b) For first-time license renewals, if the renewal is submitted prior to the expiration of the original license, the continuing competency hour requirements shall be one-half of the normal cycle. The requirements of 1399.93 shall apply to any renewal under this subsection.

(c) For those licensees accumulating “continuing education units” or “CEUs” under the continuing education requirements of APTA and CPTA, one CEU is equal to ten hours.


HISTORY
1. New section filed 10-7-2009; operative 11-6-2009 (Register 2009, No. 41).
2. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

§1399.92. Content Standards for Continuing Competency

Continuing competency hours must be obtained in subjects related to either the professional practice of physical therapy or patient/client management.

(a) The professional practice of physical therapy includes but is not limited to professional accountability, professional behavior and professional development.

(b) Patient/client management includes but is not limited to examination, evaluation and diagnosis and prognosis; plan of care; implementation; education; and discharge.


HISTORY
1. New section filed 10-7-2009; operative 11-6-2009 (Register 2009, No. 41).
2. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).
§1399.93. Continuing Competency Subject Matter Requirements and Other Limitations
For each renewal cycle, a licensee's continuing competency hours must include the following:
   (a) Two hours in ethics, laws and regulations, or some combination thereof, and
   (b) Four hours in life support for health care professionals. Such training should be comparable to, or more advanced than, the American Heart Association's Basic Life Support Health Care Provider course.


HISTORY
1. New section filed 10-7-2009; operative 11-6-2009 (Register 2009, No. 41).
2. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

§1399.94. Authorized Pathways for Obtaining Hours
Continuing competency hours must be obtained through an authorized pathway, which may be either traditional or alternate.
   (a) Traditional pathways are those offered by an approved provider. There is no limit to the number of hours which may be accumulated through traditional pathways. The traditional pathways are:
      (1) Continuing education courses, including home and self-study courses, approved through an agency recognized by the board under the provisions of regulation section 1399.95; and
      (2) College coursework from an accredited institution.
   (b) Alternate pathways are those offered by an entity other than an approved provider. Only those alternate pathways described in this section may be used to accumulate continuing competency hours. The number of alternate pathway hours that may be applied for a renewal cycle may not exceed any cap noted below. Hours may be granted only in accordance with the conversion formula for each alternate pathway noted below.
Alternate Pathways

<table>
<thead>
<tr>
<th>Description</th>
<th>Cap</th>
<th>Conversion</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A) Publishing a peer-reviewed journal article, case study, or book chapter.</td>
<td>16 hours</td>
<td>5 hours per article, study or chapter</td>
</tr>
<tr>
<td>(B) Developing or presenting an approved college or continuing education course for the first time.</td>
<td>16 hours</td>
<td>4 hours for each course</td>
</tr>
<tr>
<td>(C) Participating as a subject matter expert in the examination process for the Board, FSBPT, or ABPTS.</td>
<td>16 hours</td>
<td>6 hours per experience</td>
</tr>
<tr>
<td>(D) Serving on a Board appointed task force.</td>
<td>16 hours</td>
<td>6 hours per experience</td>
</tr>
<tr>
<td>(E) Performing in a role as a clinical instructor where the student’s clinical experience is full time and lasts at least 4 weeks. Effective January 1, 2013, the clinical instructor must be credentialed by APTA or hold a substantially similar credential.</td>
<td>12 hours</td>
<td>1 hour per week</td>
</tr>
<tr>
<td>(F) Attending a conference relating to the practice of physical therapy where proof of attendance is provided by the conference sponsor.</td>
<td>8 hours</td>
<td>2 hours per conference</td>
</tr>
<tr>
<td>(G) Attending a conference offered by FSBPT, APTA, or a component thereof.</td>
<td>8 hours</td>
<td>4 hours per conference</td>
</tr>
<tr>
<td>(H) Attending a Board meeting.</td>
<td>8 hours</td>
<td>2 hours per meeting</td>
</tr>
<tr>
<td>(I) Completing a FSBPT practice review tool.</td>
<td>6 hours</td>
<td>6 hours per experience</td>
</tr>
<tr>
<td>(J) Successfully passing one of the American Board of Physical Therapy Specialties’ certified specialist examinations, including re-certification examinations.</td>
<td>6 hours</td>
<td>6 hours per examination</td>
</tr>
<tr>
<td>(K) Completing training as an expert consultant for the Board.</td>
<td>6 hours</td>
<td>6 hours per training</td>
</tr>
<tr>
<td>(L) Successfully passing the Board’s California Law Examination.</td>
<td>2 hours</td>
<td>2 hours per examination</td>
</tr>
</tbody>
</table>


HISTORY
1. New section filed 10-7-2009; operative 11-6-2009 (Register 2009, No. 41).
2. Change without regulatory effect amending subsections (a)(1)-(2) filed 9-21-2015 pursuant to section 100, title 1, California Code of Regulations (Register 2015, No. 39).
3. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).
§1399.95. Standards for Approval Agencies
(a) An approval agency may be recognized by the board only if the approval agency has met the standards in this section. Once recognized, an approval agency may approve a provider operating consistent with section 1399.96.
(b) Each approval agency must have the capacity to evaluate each course offered by a provider in accordance with section 1399.96 and shall conduct audits of at least 10% of its approved providers' courses to ensure compliance with this article.
(c) Each approval agency has a procedure for periodic review of courses to ensure content quality and currency.
(d) Each approval agency shall have a procedure to respond to complaints.
(e) Each approval agency shall provide services to all persons or entities without unlawful discrimination.
(f) Each approval agency that also offers continuing education courses directly to a licensee shall have a means to avoid a conflict of interest between its function as a provider and its function as an approval agency.
(g) Each approval agency offering retroactive approval for a course must evaluate the course for compliance with the standards relating to courses found in 1399.96. The approval agency shall comply with the record retention requirements of 1399.96(j).
(h) Upon written confirmation from the board that an approval agency has been recognized, the approval agency may advertise that it has been recognized by the board.
(i) The board may require the approval agency to submit records demonstrating its compliance with this article.
(j) Failure of an approval agency to substantially comply with the provisions as set forth in this section, or a material misrepresentation to the board, shall constitute cause for withdrawal of recognition by the board. Recognition can be revoked only by the members of the board, after written notice setting forth the reasons for withdrawal and after affording a reasonable opportunity for the approval agency to be heard.


HISTORY
1. New section filed 10-7-2009; operative 11-6-2009 (Register 2009, No. 41).
2. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

§1399.96. Standards for Approved Providers
Before it may approve a provider, the approval agency shall require that the provider adhere to the following requirements:
(a) Topics and subject matter for each course shall be pertinent to the practice of physical therapy as required by section 1399.92.
(b) Instructors for each course shall be competent in the subject matter and shall be qualified by appropriate education, training, experience, scope of practice or licensure.
(c) Each course shall have a syllabus that includes learning objectives, bibliography and either a schedule, for courses offered in-person, or an outline, for courses offered online.
(d) Each course shall have written educational goals and specific learning objectives which are measurable and which serve as a basis for an evaluation of the effectiveness of the course.
(e) When an approved provider works with others on the development, distribution and/or presentation of a continuing education course (joint sponsorship), there shall be procedures to identify and document the functions of each participating party.
(f) Each approved provider shall periodically review its courses to ensure content quality and currency.
(g) Each participant shall be given the opportunity to evaluate each course and offer feedback to the approved provider. The approved provider shall consider any such evaluations for the purpose of updating or revising courses.
(h) Each approved provider has a procedure to respond to complaints.
(i) Each approved provider provides services to all licensees without unlawful discrimination.
(j) Each approved provider shall maintain records regarding course content and licensee attendance for a minimum of seven years.
(k) Each approved provider and instructor shall disclose any financial interest in products recommended during a course.
(l) Each approved provider shall provide a certificate of completion to attendees.
(m) Each approved provider shall ensure that any information it disseminates publicizing its continuing education courses is true and not misleading. Such information shall include a statement with the name of the approval agency, that such agency may be contacted about any concerns, any approved provider identification number, and the number of hours for which the course has been approved.


HISTORY
1. New section filed 10-7-2009; operative 11-6-2009 (Register 2009, No. 41).
2. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

§1399.97. Record Keeping
(a) Each licensee shall keep and maintain records showing that each course or activity for which credit is claimed has been completed. Those records shall reflect the title of the course or activity, the date taken or completed, and the record of participation.
(b) Each licensee shall retain such documentation for a period of five years after the course or activity concludes.
(c) Each licensee shall provide copies of such documentation to the board or its designee upon request.


HISTORY
1. New section filed 10-7-2009; operative 11-6-2009 (Register 2009, No. 41).
2. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).
§1399.98. Inactive Status
(a) Upon written request, the board may grant inactive status to a licensee if, at the time of application for inactive status, the license is current and not suspended, revoked, or otherwise punitively restricted by the board.
(b) The licensee shall not engage in any activity for which a license is required.
(c) An inactive license shall be renewed during the same time period in which an active license or certificate is renewed. Any continuing education requirements for renewing a license are waived.
(d) The renewal fee for an inactive license is the same as the fee to renew an active license.
(e) To restore an inactive license to an active status, the holder shall do both of the following:
(1) Pay the renewal and any continuing competency fees.
(2) Complete continuing education equivalent to that required for a single renewal period of an active license.
(f) The inactive status of any licensee does not deprive the board of its authority to institute or continue any disciplinary or enforcement action against the licensee.

Note: Authority cited: Sections 2615 and 2649, Business and Professions Code. Reference: Sections 700, 701, 702, 703, 704, 2644 and 2649, Business and Professions Code.

HISTORY
1. New section filed 10-7-2009; operative 11-6-2009 (Register 2009, No. 41).
2. Change without regulatory effect amending Note filed 7-6-2017 pursuant to section 100, title 1, California Code of Regulations (Register 2017, No. 27).

§1399.99. Exemption from Continuing Competency Requirements
At the time of applying for renewal of a license, a licensee may request an exemption from the continuing competency requirements. The request for exemption must provide the following information:
(a) Evidence that during the renewal period prior to the expiration of the license, the licensee was residing in another country for one year or longer, reasonably preventing completion of the continuing competency requirements; or
(b) Evidence that the licensee was absent from California because of military service for a period of one year or longer during the renewal period, preventing completion of the continuing competency requirements; or
(c) Evidence that the licensee should be exempt from the continuing competency requirements for reasons of health or other good cause which include:
(1) Total physical and/or mental disability for one (1) year or more during the renewal period and the inability to work during this period has been verified by a licensed physician or surgeon or licensed clinical psychologist; or
(2) Total physical and/or mental disability for one (1) year or longer of an immediate family member for whom the licensee had total responsibility, as verified by a licensed physician or surgeon or licensed clinical psychologist.
(d) An exemption under this section shall not be granted for two consecutive renewal periods. In the event a licensee cannot complete continuing competency requirements following an exemption, the licensee may only renew the license in an inactive status.

Article 14: Sponsored Free Health Care Events – Requirements for Exemption

§1399.99.1. Definitions
For the purposes of section 901 of the Code:
(a) “Community-based organization” means a public or private nonprofit organization that is representative of a community or a significant segment of a community, and is engaged in meeting human, educational, environmental, or public safety community needs.
(b) “Out-of-state practitioner” means a person who is not licensed in California as a physical therapist, but who holds a current valid and active license or certificate in good standing in another state, district, or territory of the United States to practice physical therapy.

Note: Authority cited: Sections 901 and 2615, Business and Professions Code. Reference: Section 901, Business and Professions Code.

§1399.99.2. Sponsoring Entity Registration and Recordkeeping Requirements
(a) Registration. A sponsoring entity that wishes to provide, or arrange for the provision of, health care services at a sponsored event under section 901 of the Code shall register with the Board not later than ninety (90) calendar days prior to the date on which the sponsored event is scheduled to begin. A sponsoring entity shall register with the Board by submitting to the Board a completed “Registration of Sponsoring Entity Under Business & Professions Code Section 901,” Form 901-A (DCA/2014-revised), which is hereby incorporated by reference.
(b) Determination of Completeness of Form. The Board may, by resolution, delegate to the Department of Consumer Affairs the authority to receive and process “Registration of Sponsoring Entity Under Business & Professions Code Section 901,” Form 901-A (DCA/2014-revised), on behalf of the Board. The Board or its delegate shall inform the sponsoring entity within fifteen (15) calendar days of receipt of Form 901-A (DCA/2014-revised), in writing, that the form is either complete and the sponsoring entity is registered or that the form is deficient and what specific information or documentation is required to complete the form and be registered. The Board or its delegate shall reject the registration if all of the identified deficiencies have not been corrected at least thirty (30) days prior to the commencement of the sponsored event.
(c) Recordkeeping Requirements. Regardless of where it is located, a sponsoring entity shall maintain, at a physical location in California, a copy of all records required by section 901 of the Code as well as a copy of the authorization for participation issued by the Board to an out-of-state practitioner. The sponsoring entity shall maintain these records for a period of at least five (5) years after the date on which a sponsored event ended. The records may be maintained in either paper or electronic form. In addition, the sponsoring entity shall keep a copy of all records.
required by section 901(g) of the Code at the physical location of the sponsored event until that event has ended. These records shall be available for inspection and copying during the operating hours of the sponsored event upon request of any representative of the Board.

(d) Requirement for Prior Board Approval of Out-of-State Practitioner.
A sponsoring entity shall not permit an out-of-state practitioner to participate in a sponsored event unless and until the sponsored entity has received written approval from the PTBC.

(e) A sponsoring entity shall place a notice visible to patients at every station where patients are being seen by a physical therapist. The notice shall be in at least 48-point type in Arial font and shall include the following statement and information:

NOTICE
Physical Therapists providing health care services at this health fair are either licensed and regulated by the Physical Therapy Board of California or hold a current valid license from another state and have been authorized to provide health care services in California only at this specific health fair.
Physical Therapy Board of California
916-561-8200
www.ptbc.ca.gov

(f) Report. Within fifteen (15) calendar days after a sponsored event has concluded, the sponsoring entity shall file a report with the Board summarizing the details of the sponsored event. This report may be in a form of the sponsoring entity's choosing, but shall include, at a minimum, the following information:
(1) The date(s) of the sponsored event;
(2) The location(s) of the sponsored event;
(3) The type(s) and general description of all health care services provided at the sponsored event; and
(4) A list of each out-of-state practitioner granted authorization pursuant to this Article who participated in the sponsored event, along with the license number of that practitioner.

Note: Authority cited: Sections 901 and 2615, Business and Professions Code. Reference: Section 901, Business and Professions Code.

HISTORY
1. New section filed 1-15-2013; operative 4-1-2013 (Register 2013, No. 3).
2. Change without regulatory effect amending subsections (a) and (b) filed 8-28-2014 pursuant to section 100, title 1, California Code of Regulations (Register 2014, No. 35).

§1399.99.3. Out-of-State Practitioner Authorization to Participate in Sponsored Event; Request for Authorization to Participate

(a) Request for Authorization to Participate. An out-of-state practitioner (“applicant”) may request authorization from the Board to participate in a sponsored event and provide such health care services at the sponsored event as would be permitted if the applicant were licensed by the Board to provide those services. An applicant shall request authorization by submitting to the Board a completed “Request For Authorization To Practice Without A License”, Form (PTBC 901-B 11/2/2011), which is hereby incorporated by reference, accompanied by a nonrefundable, and non-transferrable processing fee of fifty dollars ($50). The applicant shall also furnish either a full set of fingerprints or submit to a Live Scan process to establish the identity of the applicant and
to permit the Board to conduct a criminal history record check. The applicant shall pay any costs for furnishing the fingerprints and conducting the criminal history record check. This fingerprinting and criminal background check requirement shall apply only to the first application for authorization that is submitted by the applicant if no more than four years have passed since the last Request for Authorization, PTBC Form 901-B (11/2/2011) was received by the Board.

(b) Response to Request for Authorization to Participate. Within twenty (20) calendar days of receiving a completed request for authorization, the Board shall notify the sponsoring entity or local government entity administering the sponsored event, whether that request is approved or denied.

(c) Denial of Request for Authorization to Participate.
(1) The Board shall deny a request for authorization to participate if:
(A) The submitted Form (PTBC 901-B 11/2/2011) is incomplete and the applicant has not responded within seven (7) calendar days to the PTBC's request for additional information.
(B) The applicant has failed to comply with a requirement of this Article or has committed any act that would constitute grounds for denial of an application for licensure by the Board.
(C) The applicant does not possess a current valid and active license in good standing. The term “good standing” means the applicant:
1. Has not been charged with an offense for any act substantially related to the practice for which the applicant is licensed by any public agency.
2. Has not entered into any consent agreement or been subject to an administrative decision that contains conditions placed upon the applicant's professional conduct or practice, including any voluntary surrender of license.
3. Has not been the subject of an adverse judgment resulting from the practice for which the applicant is licensed that the Board determines constitutes evidence of a pattern of negligence or incompetence.
(D) The Board has been unable to obtain a timely report of the results of the criminal history check for the applicant from the California Department of Justice.
(2) The Board may deny a request for authorization to participate if any of the following occurs:
(A) The request is received less than twenty (20) calendar days before the date on which the sponsored event will begin.
(B) The applicant has been previously denied a request for authorization by the Board to participate in a sponsored event.
(C) The applicant has previously had an authorization to participate in a sponsored event terminated by the Board.
(D) The applicant has participated in three (3) or more sponsored events during the twelve (12) month period immediately preceding the current application.
(d) Appeal of Denial. An applicant requesting authorization to participate in a sponsored event may appeal the denial of such request by following the procedures set forth in section 1399.99.4(d) and (e).
(e) An out-of-state practitioner who receives authorization to practice physical therapy at an event sponsored by a local government entity shall place a notice visible to patients at every station where patients are being seen by a physical therapist. The notice shall be in at least 48-point type in Arial font and shall include the following statement and information:

NOTICE
I hold a current valid license to practice physical therapy in a state other than California. I have been authorized by the Physical Therapy Board of California to provide health care services in California only at this specific health fair.

Physical Therapy Board of California
916-561-8200
www.ptbc.ca.gov

Note: Authority cited: Sections 901 and 2615, Business and Professions Code. Reference: Section 901, Business and Professions Code.

HISTORY
1. New section filed 1-15-2013; operative 4-1-2013 (Register 2013, No. 3).

§1399.99.4. Termination of Authorization and Appeal
(a) Grounds for Termination. The Board may terminate an out-of-state practitioner's authorization to participate in a sponsored event for any of the following reasons:
(1) The out-of-state practitioner has failed to comply with any applicable provision of this Article, or any applicable practice requirement or regulation of the Board.
(2) The out-of-state practitioner has committed an act that would constitute grounds for discipline if done by a licensee of the Board.
(3) The Board has received a credible complaint indicating that the out-of-state practitioner is unfit to practice at the sponsored event or has otherwise endangered consumers of the practitioner's services.
(b) Notice of Termination. The Board shall provide both the sponsoring entity or a local government entity administering the sponsored event, and the out-of-state practitioner with a written notice of the termination, including the basis for the termination. If the written notice is provided during a sponsored event, the Board may provide the notice to any representative of the sponsored event on the premises of the event.
(c) Consequences of Termination. An out-of-state practitioner shall immediately cease his or her participation in a sponsored event upon receipt of the written notice of termination.
Termination of authority to participate in a sponsored event shall be deemed a disciplinary measure reportable to the national practitioner data banks. In addition, the Board shall provide a copy of the written notice of termination to the licensing authority of each jurisdiction in which the out-of-state practitioner is licensed.
(d) Appeal of Termination. An out-of-state practitioner may appeal the Board's decision to terminate an authorization in the manner provided by section 901(j)(2) of the Code. The request for an appeal shall be considered a request for an informal hearing under the Administrative Procedure Act.
(e) Informal Conference Option. In addition to requesting a hearing, the out-of-state practitioner may request an informal conference with the Executive Officer regarding the reasons for the termination of authorization to participate. The Executive Officer shall, within thirty (30) days from receipt of the request, hold an informal conference with the out-of-state practitioner. At the conclusion of the informal conference, the Executive Officer may affirm or dismiss the termination of authorization to participate. The Executive Officer shall state in writing the reasons for his or her action and mail a copy of his or her findings and decision to the out-of-state practitioner within ten (10) days from the date of the informal conference. The out-of-state
practitioner does not waive his or her request for a hearing to contest a termination of
authorization by requesting an informal conference. If the termination is dismissed after the
informal conference, the request for a hearing shall be deemed to be withdrawn.
Note: Authority cited: Sections 901 and 2615, Business and Professions Code. Reference: Section
901, Business and Professions Code.
HISTORY
1. New section filed 1-15-2013; operative 4-1-2013 (Register 2013, No. 3).