

HOUSE BILL No. 1045

DIGEST OF INTRODUCED BILL

Citations Affected: IC 25-23.5-1.

Synopsis: Occupational therapy. Revises the definition of "practice of occupational therapy". Adds a definition of "occupational therapy services".

Effective: July 1, 2014.

Kirchhofer

January 7, 2014, read first time and referred to Committee on Public Health.



Second Regular Session 118th General Assembly (2014)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2013 Regular Session and 2013 First Regular Technical Session of the General Assembly.

HOUSE BILL No. 1045

A BILL FOR AN ACT to amend the Indiana Code concerning professions and occupations.

Be it enacted by the General Assembly of the State of Indiana:

- 1 SECTION 1. IC 25-23.5-1-5, AS AMENDED BY P.L.197-2007,
2 SECTION 61, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3 JULY 1, 2014]: Sec. 5. "Practice of occupational therapy" means the
4 functional assessment of learning and performance skills and the
5 analysis, selection, and adaptation of exercises or equipment for a
6 person whose abilities to perform the requirements of daily living are
7 threatened or impaired by physical injury or disease; mental illness; a
8 developmental deficit; the aging process; or a learning disability. The
9 term consists primarily of the following functions:
10 (1) Planning and directing exercises and programs to improve
11 sensory-integration and motor functioning at a level of
12 performance neurologically appropriate for a person's stage of
13 development.
14 (2) Analyzing, selecting, and adapting functional exercises to
15 achieve and maintain a person's optimal functioning in daily
16 living tasks and to prevent further disability.



1 therapeutic use of everyday life occupations and occupational
2 therapy services to:

- 3 (1) aid individuals or groups to participate in meaningful roles
4 and situations in the home, school, the workplace, the
5 community, or other settings;
6 (2) promote health and wellness through research and
7 practice; and
8 (3) serve individuals or groups who are well but have been or
9 are at risk for developing an illness, injury, disease, disorder,
10 condition, impairment, disability, activity limitation, or
11 participation restriction.

12 The practice of occupational therapy addresses the physical,
13 cognitive, psychosocial, sensory, and other aspects of performance
14 in a variety of contexts to support engagement in everyday life
15 activities that affect a person's health, well-being, and quality of
16 life throughout the person's life span.

17 SECTION 2. IC 25-23.5-1-6.5 IS ADDED TO THE INDIANA
18 CODE AS A NEW SECTION TO READ AS FOLLOWS
19 [EFFECTIVE JULY 1, 2014]: Sec. 6.5. "Occupational therapy
20 services" means services that are provided to promote health and
21 wellness, prevent disability, preserve functional capabilities,
22 prevent barriers for occupational performance from occurring,
23 and enable or improve performance in everyday activities,
24 including services that do the following:

- 25 (1) Establish, remediate, or restore a skill or ability that is
26 impaired or not yet developed. Occupational therapy services
27 include identifying speech, language, and hearing that are
28 impaired or not yet developed, but does not include the
29 remediation of speech, language, and hearing skills and
30 abilities.
31 (2) Modify or adapt a person or an activity or environment of
32 a person or compensate for a loss of a person's functions.
33 (3) Evaluate factors that affect daily living activities,
34 instrumental activities of daily living, and other activities
35 relating to work, play, leisure, education, and social
36 participation. These factors may include body functions, body
37 structure, habits, routines, role performance, behavior
38 patterns, sensory motor skills, cognitive skills, communication
39 and interaction skills, and cultural, physical, psychosocial,
40 spiritual, developmental, environmental, and socioeconomic
41 contexts and activities that affect performance.
42 (4) Perform interventions and procedures relating to the



- 1 factors described in subdivision (3), including the following:
2 (A) Task analysis and therapeutic use of occupations,
3 exercises, and activities.
4 (B) Education and training in self-care, self-management,
5 home management, and community or work reintegration.
6 (C) Care coordination, case management, transition, and
7 consultative services.
8 (D) Modification of environments and adaptation
9 processes, including the application of ergonomic and
10 safety principles.
11 (E) Assessment, design, fabrication, application, fitting,
12 and training in assistive technology, adaptive devices, and
13 orthotic devices, and training in the use of prosthetic
14 devices. However, this does not include the following:
15 (i) Gait training.
16 (ii) Training in the use of hearing aids,
17 tracheoesophageal valves, speaking valves, or
18 electrolarynx devices related to the oral production of
19 language.
20 (iii) Remediation of speech, language, and hearing
21 disorders.
22 (iv) Fabrication of shoe inserts.
23 (F) Assessment, recommendation, and training in
24 techniques to enhance safety, functional mobility, and
25 community mobility, including wheelchair management
26 and mobility. However, this does not include gait training.
27 (G) Assessment and management of feeding, eating, and
28 swallowing to enable eating and feeding performance.
29 (H) Application of physical agent modalities and use of a
30 range of specific therapeutic procedures, including
31 techniques to enhance sensory-motor, perceptual, and
32 cognitive processing, manual therapy techniques, and
33 adjunctive and preparatory activities for occupational
34 performance. However, manual therapy does not include
35 spinal manipulation, spinal adjustment, or grade 5
36 mobilization.

