
A BILL FOR AN ACT

RELATING TO THE PHYSICAL THERAPY PRACTICE ACT.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that the Physical Therapy
2 Practice Act was established in 1985, when health care focused
3 on the curing of illness. Since that time, health care has
4 evolved to a greater focus on the overall wellness and
5 prevention of illness and disability with the growth of
6 evidence-based treatment intervention options for patients.

7 The legislature further finds that dry needling is a
8 therapeutic intervention tool that is used in conjunction with
9 other physical therapy interventions in order to improve pain
10 control, decrease muscle tension, accelerate active
11 rehabilitation, facilitate normal movement, and return to
12 function for overall better quality of life. Dry needling is
13 recognized by the American Physical Therapy Association,
14 American Academy of Orthopaedic Manual Physical Therapists, and
15 Federation of State Boards of Physical Therapists and has been
16 utilized effectively to treat neuromuscular pain in specific
17 populations, such as acute and overuse sport injuries, post-



1 operative rehabilitative care, chronic pain, opioid dependence,
2 work restrictions, and disability.

3 Dry needling is allowed in all but seven states, including
4 Hawaii. Physical therapists practicing dry needling in federal
5 facilities in Hawaii, as well as across the nation, have
6 patients who have benefited from its use. However, civilian
7 patients in Hawaii are denied access and choice of dry needling
8 care from a physical therapist when appropriate.

9 The legislature also finds that the American Physical
10 Therapy Association endorses the professional liability
11 insurance administered by the Healthcare Providers Service
12 Organization and underwritten by American Casualty Company of
13 Reading, Pennsylvania, a CNA company. A review of a CNA claim
14 database from 2012 to 2017 reveals that of the total of 3,413
15 physical therapist claims, there were only thirty-four physical
16 therapy claims related to dry needling reported, representing
17 less than one per cent of the total amount of claims against
18 physical therapists and a total loss incurred of \$341,290.

19 The legislature further finds that the Federation of State
20 Boards of Physical Therapy is an organization made up of fifty-
21 three physical therapy jurisdictions within the United States.



1 The Federation of State Boards of Physical Therapy upholds a
2 mission to protect the public by providing leadership that
3 promotes safe and competent physical therapy services, including
4 administration and maintenance of an examination, licensure, and
5 disciplinary database.

6 The Federation of State Boards of Physical Therapy
7 commissioned the Human Resources Research Organization for the
8 July 10, 2015, practice analysis of the competencies required of
9 physical therapists to perform dry needling. These competencies
10 can provide a strong foundation of professional standards,
11 including education and training requirements and practice
12 assessment, management, and regulation. In this practice
13 analysis, the specific definition of competency, in terms of a
14 physical therapist performing dry needling, was determined to be
15 safe and effective for the patient and the physical therapist.
16 The practice analysis further determined that eighty-six per
17 cent of the knowledge requirements for dry needling competency
18 is acquired during physical therapy basic entry level education
19 and consists of knowledge related to evaluation, assessment,
20 diagnosis, and plan of care development. Furthermore, the
21 remaining fourteen per cent, or sixteen individuals items, of



1 knowledge requirements for dry needling competency must be
2 acquired through post-graduate education or specialized training
3 in dry needling.

4 The legislature further finds that the Hawaii Physical
5 Therapy Practice Act, which is codified under chapter 461J,
6 Hawaii Revised Statutes, establishes the board of physical
7 therapy to provide licensing requirements for physical
8 therapists and physical therapist assistants in the interest of
9 safeguarding life and health. As such, the board of physical
10 therapy is responsible for content standards of continuing
11 competency related to the professional practice of physical
12 therapy and patient or client management.

13 Under existing law, physical therapists are prohibited from
14 breaking or puncturing good skin integrity through surgery or
15 injection. This prohibition was originally intended to ensure
16 that physical therapists do not perform surgery and medical
17 procedures outside the scope of practice and education of
18 physical therapists. However, the existing law does not allow
19 for modern techniques in physical therapy that are within the
20 scope of physical therapy practice and education.



1 Accordingly, the purpose of this Act is to clarify the
2 scope of practice for licensed physical therapists to include
3 the practice of dry needling.

4 SECTION 2. Section 461J-1, Hawaii Revised Statutes, is
5 amended as follows:

6 1. By adding a new definition to be appropriately inserted
7 and to read:

8 "Dry needling" means a skilled technique performed by a
9 physical therapist using filiform needles to penetrate the skin
10 or underlying tissues to affect change in body structures and
11 functions for the evaluation and management of
12 neuromusculoskeletal conditions, pain, movement impairments, and
13 disability."

14 2. By amending the definition of "physical therapy" or
15 "physical therapy services" to read:

16 "Physical therapy" or "physical therapy services" means
17 the examination, treatment, and instruction of human beings to
18 detect, assess, prevent, correct, alleviate, and limit physical
19 disability, bodily malfunction, pain from injury, disease, and
20 any other physical or mental condition as performed by a



1 physical therapist appropriately licensed under this chapter.

2 It includes but is not limited to:

3 (1) Administration, evaluation, modification of treatment,
4 and instruction involving the use of physical
5 measures, activities, and devices, for preventive and
6 therapeutic purposes; provided that should the care or
7 treatment given by a physical therapist or physical
8 therapist assistant contravene treatment diagnosed or
9 prescribed by a medical doctor, osteopath, or as
10 determined by the board, the physical therapist shall
11 confer with the professional regarding the manner or
12 course of treatment in conflict and take appropriate
13 action in the best interest of the patient; and

14 (2) The provision of consultative, educational, and other
15 advisory services for the purpose of reducing the
16 incidence and severity of physical disability, bodily
17 malfunction, or pain[-], including the promotion and
18 maintenance of fitness, health, and quality of life in
19 all age populations."

20 3. By amending the definition of "practice of physical
21 therapy" to read:



- 1 "Practice of physical therapy" includes, but is not
2 limited to, the use of the following:
- 3 (1) Physical agents, such as heat, cold, water, air,
4 sound, compression, light, electricity, and
5 electromagnetic radiation;
- 6 (2) Exercise with or without devices, joint mobilization,
7 mechanical stimulation; dry needling; biofeedback;
8 postural drainage; traction; positioning, massage,
9 splinting, training in locomotion, and other
10 functional activities with or without assisting
11 devices; and correction of posture, body mechanics,
12 and gait;
- 13 (3) Tests and measurements of: muscle strength, force,
14 endurance, and tone; joint motion, mobility, and
15 stability; reflexes and automatic reaction; movement
16 skill and accuracy; sensation and perception;
17 peripheral nerve integrity; locomotor skill,
18 stability, and endurance; activities of daily living;
19 cardiac, pulmonary, and vascular functions; the fit,
20 function, and comfort of prosthetic, orthotic, and
21 other assisting devices; posture and body mechanics;



1 limb strength, circumference, and volume; thoracic
2 excursion and breathing patterns; vital signs; nature
3 and locus of pain and conditions under which pain
4 varies; photosensitivity; and the home and work
5 physical environments."

6 SECTION 3. Section 461J-2.5, Hawaii Revised Statutes, is
7 amended to read as follows:

8 " **[+]§461J-2.5[+]** Prohibited practices. A physical
9 therapist shall not use invasive procedures. For purposes of
10 this section, an invasive procedure is the breaking or
11 puncturing of a person's good skin integrity, for example,
12 through surgery or injections[-], with the exception of dry
13 needling."

14 SECTION 4. Section 461J-10.13, Hawaii Revised Statutes, is
15 amended to read as follows:

16 " **[+]§461J-10.13[+]** Authorized providers of continuing
17 competence units. Continuing competence units shall be obtained
18 from a provider or agency approved by the board, including but
19 not limited to:



- 1 (1) Continuing education courses, including home- and
2 self-study courses, obtained from an agency recognized
3 by the board;
- 4 (2) College coursework from an educational institution
5 accredited by the United States Department of
6 Education or other agency recognized by the board; and
- 7 (3) Other competence related activities approved by the
8 board or an agency recognized by the board[-];
9 provided that other competence related activities may
10 include and reflect the following requirements for dry
11 needling specific knowledge, as needed:
 - 12 (A) Surface anatomy as it relates to underlying
13 tissues, organs, and other structures, including
14 variations in form, proportion, and anatomical
15 landmarks;
 - 16 (B) Emergency preparedness and response procedures
17 related to secondary physiological effects or
18 complications associated with dry needling;
 - 19 (C) Emergency preparedness and response procedures
20 related to secondary emotional effects or
21 complications associated with dry needling;



- 1 (D) Standards for needle handling;
- 2 (E) Factors influencing safety and injury prevention;
- 3 (F) Personal protection procedures and techniques as
4 related to dry needling;
- 5 (G) Theoretical basis for dry needling;
- 6 (H) Theoretical basis for combining dry needling with
7 other interventions;
- 8 (I) Secondary effects or complications associated
9 with dry needling on other systems;
- 10 (J) Theoretical basis of pain science, including
11 anatomy, physiology, pathophysiology, and
12 relation to body structures and function;
- 13 (K) Contraindications and precautions related to dry
14 needling;
- 15 (L) Palpation techniques as related to dry needling;
- 16 (M) Needle insertion techniques;
- 17 (N) Needle manipulation techniques;
- 18 (O) Physiological response to dry needling; and
- 19 (P) Solid filament needles."

20 SECTION 5. Statutory material to be repealed is bracketed
21 and stricken. New statutory material is underscored.



1 SECTION 6. This Act shall take effect on July 1, 2020.

2

B/R 
INTRODUCED BY: _____

JAN 16 2020



H.B. NO. 1807

Report Title:

Dry Needling; Physical Therapists; Scope of Practice

Description:

Clarifies the scope of practice for licensed physical therapists to include the practice of dry needling. Expands other competence related activities to include certain dry needling specific knowledge.

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