

2025 APTA House of Delegates Motions Summary for APTA-KY

This is an attempt to briefly summarize the full scope of motions submitted to the 2025 APTA House of Delegates. Each summary includes the proposal and its potential implications for practice, governance, or member participation per the proposer of the motion.

Adopt Code of Ethics for the Physical Therapy Profession

RC 01-25

Proposed by: Board of Directors

Proposes the adoption of an updated Code of Ethics for the Physical Therapy Profession. The revision modernizes the Code to better reflect the evolving responsibilities, settings, and societal roles of physical therapists. It introduces clarified guidance on equity, inclusion, and responsibilities related to technology use, team-based care, and patient autonomy. This updated version supersedes the 2010 Code of Ethics and is intended to enhance professional integrity, public trust, and alignment with the APTA Vision.

Provide Voting Rights for Student Engagement Group Delegates

RC 02-25

Proposed by: APTA Oregon and Student Council

Amends APTA bylaws to grant two voting delegate positions to the APTA Student Engagement Group. This change aligns the Student Engagement Group with the PTA Engagement Group, which already has voting privileges. It aims to increase student participation in governance and ensure student perspectives are formally represented during House of Delegates decision-making.

Align Bylaws with Illinois Not for Profit Corporation Act

RC 03-25

Proposed by: Board of Directors

Updates the APTA bylaws to align with legal requirements under the Illinois Not for Profit Corporation Act (NFPCA), where APTA is incorporated. These amendments ensure statutory compliance and legal consistency by revising terminology, quorum definitions, meeting procedures, and authority clauses.

Amend Bylaws Related to Association Committees

RC 04-25

Proposed by: Board of Directors

Revises bylaws to restructure APTA's committees. Specifically, it eliminates the Executive Committee of the Board, clarifies duties of the Reference Committee, and formalizes the standing committee structure. These changes streamline governance and improve clarity of committee responsibilities.

Amend Bylaws to Grant PTA Members the Right to Serve on the Board of Directors

RC 05-25

Proposed by: APTA Utah

Seeks to revise eligibility requirements to allow PTA members to serve on APTA's Board of Directors. This would be a significant change toward inclusivity, recognizing the role of PTAs in shaping the future of the profession.

Amend Bylaws Article IV, Section 5 – Tenure

RC 06-25

Proposed by: Board of Directors

Proposes updates to clarify the term limits for Board members, ensuring consistency in language across bylaws. The amendment sets clearer expectations on duration, reappointment eligibility, and processes for filling unexpired terms, reducing ambiguity.

Amend Bylaws Related to Elections

RC 07-25

Proposed by: Board of Directors

Refines APTA's election procedures to enhance clarity, consistency, and fairness. Proposed changes include aligning nominating timelines, refining eligibility criteria, and removing outdated procedural language. This supports a transparent and equitable nomination and election process.

Amend Bylaws Related to Bylaw Amendment Process

RC 08-25

Proposed by: Board of Directors

Seeks to revise the process for submitting and debating future amendments to APTA's bylaws. It introduces extended timeframes for review, clarifies member input mechanisms, and codifies flexibility in scheduling amendment discussions.

Amend the Role of Physical Therapy and APTA in Mental Health

RC 09-25

Proposed by: APTA Colorado

Expands and updates APTA's official position statement on the role of physical therapy in addressing mental health. The amendment reinforces the physical therapist's role in recognizing, referring, and supporting patients with mental health needs, including trauma-informed care, behavioral health integration, and interprofessional collaboration. It positions the profession to lead holistic patient care.

Amend the Guiding Principles to Achieve the Vision

RC 10-25

Proposed by: APTA Oregon

Revises the 'Guiding Principles to Achieve the Vision' to explicitly include references to equity, diversity, and access to care. This update strengthens APTA's commitment to social responsibility, inclusion, and reducing health disparities.

Adopt: Faculty Engagement in Clinical Practice

RC 11-25

Proposed by: Board of Directors

This motion calls for the formal adoption of a position supporting faculty engagement in clinical practice. It affirms that clinical practice by faculty members enhances their teaching and scholarship, and directly benefits student education and patient care. The motion supports removing institutional barriers and creating flexible pathways that allow faculty to maintain clinical competence through active practice. APTA KY members may be interested in this motion as it supports ongoing clinical relevance and integration of real-world practice into education.

Amend: Telehealth Position to Include Education and Broadband Access

RC 12-25

****Proposed by:** Arizona**

This motion updates APTA's position on telehealth by adding two new points: one supporting education in telehealth competencies for PTs and PTAs, and another promoting broadband access as a healthcare equity issue.

Adopt: Principles to Reduce Education Cost & Expand Workforce

RC 13-25

****Proposed by:** Arizona**

This motion adopts guiding principles aimed at reducing the cost of physical therapy education and expanding workforce entry. It supports innovations in education delivery, calls for cost transparency, and urges collaborative solutions to rising tuition and debt burdens.

Adopt: Support for Collective Bargaining

RC 14-25

****Proposed by:** Arizona**

This motion affirms APTA's support for the right of PTs and PTAs to engage in collective bargaining. It is a response to growing corporate consolidation and burnout in healthcare settings, and it echoes support by other health professions like the AMA.

Amend: Definition of Diagnosis by PTs

RC 15-25

****Proposed by:** Arizona**

This motion proposes amending APTA's definition of 'diagnosis by physical therapists' to better reflect PT autonomy and clarify the distinction between PT diagnosis and medical diagnosis. It strengthens the identity of PTs as independent providers.

Amend: Consumer Protection via Licensure

RC 16-25

****Proposed by:** Arizona**

This motion updates language related to protecting the public through licensure of PTs and PTAs. It clarifies that licensure is a mechanism for both ensuring public safety and enabling professional mobility. The revised language also acknowledges the impact of the PT Compact and telehealth.

Approve: Primary Care as Area of Specialization

RC 17-25

****Proposed by:**** Board of Directors

This motion approves Primary Care Physical Therapy as a new specialty certification under the ABPTS. It formalizes Primary Care PT as an area of clinical expertise and updates APTA's Clinical Specialization Policy to include it. This addition allows PTs to pursue board certification in Primary Care starting in 2025.

Approve: Name Change of Women's Health PT Specialty

RC 18-25

Proposed by: Board of Directors

This motion proposes changing the name of the Women's Health Physical Therapy specialty to Pelvic and Women's Health Physical Therapy through the American Board of Physical Therapy Specialties (ABPTS). It also amends APTA's Clinical Specialization Policy to reflect the new title. The updated name more accurately captures the specialty's full clinical scope, which includes care for all genders and pediatric pelvic health. This change aligns with current clinical practice and the upcoming revision of the Description of Specialty Practice (DSP) in 2025.

Election: Honorary Membership for James Leahy

RC 19-25

****Proposed by:**** Board of Directors

This motion nominates James Leahy for honorary membership in APTA. Mr. Leahy has provided long-standing service to the profession and organization in a non-PT role, contributing to advocacy, public policy, and organizational leadership. Honorary membership is a recognition of his exceptional contributions.

Amend: Standing Rules to Establish Institutional Groups

RC 20-25

****Proposed by:**** Board of Directors

This motion proposes an amendment to APTA's Standing Rules to formalize the creation of institutional groups. These groups would allow institutions (e.g., academic programs, employer organizations) to be more engaged in APTA governance and activities. This creates opportunities for enhanced collaboration between academia, practice settings, and APTA.

Charge to Establish Plan for AI and Digital Health Integration in Physical Therapy

RC 21-25

Proposed by: California

This motion directs APTA to establish a comprehensive plan to integrate artificial intelligence (AI) and digital health into physical therapy practice, education, and research. The goal is to ensure responsible, ethical, and effective use of digital technologies while protecting professional autonomy and patient safety.

Adopt Inclusion of PT in National Standards for AI and Digital Health Governance

RC 22-25

Proposed by: California, Leadership and Innovation

This motion urges APTA to advocate for PT representation in national efforts to develop ethical and equitable standards in AI, machine learning, and digital health. It addresses data governance, liability, and patient safety. For KY PTs, this ensures that the profession's voice shapes national policy on emerging technologies that will influence care delivery.

Amend Financial Transparency of PT Education Programs

RC 23-25

Proposed by: Colorado

Proposes adding a financial value benchmark to the APTA's existing financial transparency statement. Programs with total costs under 150% of state-average PT salaries should disclose this on their websites.

Amend Standing Rules SR2 – Formation and Recognition of Sections and Academies

RC 24-25

Proposed by: Section on Research

This motion updates criteria for forming or recognizing sections and academies, aligning with evolving organizational needs and clarity in leadership expectations.

Autonomous Physical Therapist Practice

RC 25-25

Proposed by: Hawaii

Amends the existing statement to affirm that physical therapy is a self-determined profession, not ancillary or allied health. It removes outdated terminology and promotes recognition of PTs as independent, primary healthcare providers.

Charge to Recognize PT as a Self-Determined Profession

RC 26-25

Proposed by: Hawaii

This charge instructs APTA to develop strategies that promote and advocate for the recognition of physical therapy as a self-determined, distinct profession. This builds upon RC25-25 and seeks to remove "allied health" language from external and internal documents.

Charge to Develop Resources for Understanding CPT Codes

RC 27-25

Proposed by: Orthopaedic Section

This motion directs APTA to create educational resources to help members understand the Current Procedural Terminology (CPT) code development and reimbursement process.

Charge to Evaluate and Recommend New CPT Evaluation and Management Codes

RC 28-25

Proposed by: Orthopaedic Section

APTA is charged with exploring new CPT codes for PT Evaluation and Management that better reflect the profession's value. This may improve alignment with current PT practices and patient needs. KY PTs can expect future CPT updates that better reflect their clinical services.

Adopt CPT Code Development Process

RC 29-25

Proposed by: Orthopaedic Section

Establishes an official APTA process for evaluating, developing, and proposing CPT codes in collaboration with stakeholders. This institutionalizes APTA's role in shaping payment codes, which could directly affect PTs' reimbursement and recognition of services.

Amend Diagnosis by Physical Therapists

RC 30-25

Proposed by: Arizona

Amends the language in the APTA position on diagnosis to clarify that PTs diagnose movement and health conditions that affect movement and function, not just impairments. It strengthens the profession's identity and legal standing in various practice settings.

Use of DPT Title and Credential Advocacy

RC 31-25

Proposed by: New York

This motion charges APTA with developing resources and advocacy tools to defend and promote the proper use of the DPT title and credentials. It seeks to address misuse and underutilization of the DPT designation and promote public understanding of physical therapist qualifications.

Pharmacology in PT Practice Amendment

RC 32-25

Proposed by: Hawaii

This motion expands APTA's position on pharmacology to include supplements, over-the-counter medications, and nutritional guidance. It affirms the PT's role in prescribing, administering, and advising on medication where permitted by law.

Workforce Data on Disability and Accommodations

RC 33-25

Proposed by: Massachusetts

This motion directs APTA to collect and report workforce data on disability status and related accommodations for PTs, PTAs, and students. The goal is to support equity and representation in the profession.

Update to Standards of Practice for the Physical Therapist

RC 34-25

Proposed by: California

This motion amends the APTA Standards of Practice to include updated language regarding diversity, telehealth, and interprofessional collaboration. It ensures relevance in current clinical and educational contexts.

Practice Modifications Related to Environmental Health Risks

RC 35-25

Proposed by: Maryland

This motion recommends clinical practice changes that reflect the growing impact of environmental health risks, such as climate change, on patients. It promotes PT roles in emergency preparedness, patient education, and advocacy for healthier communities.

Evidence-Based Practice Statement Update

RC 36-25

Proposed by: North Carolina

This motion updates APTA's position on evidence-based practice to reflect current terminology and reaffirm the role of clinical expertise and patient values in the integration of evidence into clinical decision-making.

Rescind Opposition to POPTS and Physician Self-Referral

RC 37-25

Proposed by: Texas

This motion proposes rescinding APTA's longstanding opposition to physician-owned physical therapy services (POPTS) and physician self-referral. It emphasizes consumer choice and evolving health care delivery models.

Adopting Social Drivers of Health

RC 38-25

Proposed by: Delaware

This motion affirms APTA's support for integrating social drivers of health (e.g., housing, food, income) into PT practice and education. It calls for resource development and advocacy to address these social determinants as part of holistic care.

Family-Friendly Workplace Resources

RC 39-25

Proposed by: Massachusetts

This motion directs APTA to create and disseminate tools that support implementation of family-forward workplace practices for physical therapy providers. This includes resources for flexible scheduling, parental leave, and caregiver support.

Improving Payment for Physical Therapy Services

RC 40-25

Proposed by: APTA Board of Directors

This motion proposes actions to enhance payment policies for physical therapy services. It urges APTA to work with insurers and payors to reduce administrative burden and ensure appropriate reimbursement for services delivered by PTs and PTAs.

Amend: Physical Therapists as Entry-Point Providers

RC41-25

Proposed by: Rhode Island

This motion seeks to amend APTA's current position by affirming that physical therapists are entry-point providers capable of serving as the first contact in patient care for movement system disorders. It emphasizes that PTs improve access, reduce unnecessary medical procedures, and lower healthcare costs. The revised position reinforces the clinical training and scope of PTs, encourages legislative support for direct access, and promotes educational pathways supporting diagnostic and triage skills.

Amend: Delivery of Value-Based Physical Therapist Services

RC42-25

Proposed by: California

This motion updates language in the value-based PT services position to better align with modern terminology and current practices. It emphasizes the role of PTs in demonstrating value, including measurable health outcomes and cost efficiency. It also highlights interdisciplinary collaboration and patient-centered care in achieving value-based outcomes.

Amend: Position on Research

RC43-25

Proposed by: California

This motion amends APTA's official position on research by emphasizing the need for rigorous inquiry that supports evidence-based practice, policy decisions, and education. It promotes interdisciplinary and translational research to improve patient outcomes, professional development, and health equity.

Charge: Establish the R.E.A.C.H. Task Force – Residency & Fellowship Expansion and Access for Community Healthcare | APTA House of Delegates

RC44-25

This motion proposes the establishment of the R.E.A.C.H. Task Force to create a national strategy for expanding physical therapy residency and fellowship programs in rural and underserved communities. The task force will develop a scalable framework addressing funding, accreditation, recruitment, and use of technology, with the goal of improving healthcare access and creating at least three new accredited programs within three years.

Charge: Access to Payment for PT Services for People with Behavioral/Mental Health Conditions

RC45-25

Proposed by: Wisconsin

This motion directs APTA to develop a plan to improve payment access for physical therapist services for individuals with behavioral and mental health conditions. It supports removing payment barriers and expanding care for populations where PTs contribute meaningfully to functional and psychosocial recovery.

Charge: Create Publicly Accessible Platform for House and Board Actions

RC46-25

Proposed by: Colorado

This motion charges APTA with creating a centralized, transparent, and user-friendly online platform for members to view House of Delegates actions, Board-led initiatives, and national legislative and regulatory efforts. It promotes accountability, engagement, and historical tracking of key initiatives.

APTA Support for Direct-Pay (Cash-Based) Physical Therapy Practice Models

RC47-25

Proposed by: New York

An alternate amendment to the same value-based care statement addressed in RC42-25. This motion further clarifies PT contributions to value-based models by incorporating updated health system terminology, advocating for integration into policy frameworks, and aligning APTA's language with federal program standards.

Amend: Education Degree Qualification Nomenclature for PTs and PTAs

RC48-25

Proposed by: Board of Directors

This motion updates the nomenclature for educational degree qualifications for PTs and PTAs in APTA policies and documents. It reflects the current doctoral-level entry degree for PTs and consistent use of language for associate degree qualifications of PTAs.

Link to Motion Concept Discussion
Motion Concept: Role of PT and APTA in Mental Health Prevention, Promotion, Management, and Payment APTA House of Delegates
Motion Concept: Amend: Guiding Principles to Achieve the Vision (HOD P06-19-46-54) APTA House of Delegates
MOTION CONCEPT: PRACTICING WHAT WE TEACH APTA House of Delegates
Motion Concept to Amend Telehealth APTA House of Delegates
MOTION CONCEPT: TRANSFORMING PT EDUCATION APTA House of Delegates
Motion Concept: Collective Bargaining APTA House of Delegates

<u>Motion Concept: Amend DIAGNOSIS BY PHYSICAL THERAPISTS APTA House of Delegates</u>
<u>Amend Diagnosis by Physical Therapists (HOD P06-12-10-09) APTA House of Delegates</u>
<u>Code of Ethics for the Physical Therapy Profession APTA House of Delegates</u>
<u>Motion Concept: Credentials and Letter Designations Amendment APTA House of Delegates</u>
<u>Motion Concept: Primary Care as a Specialization APTA House of Delegates</u>
<u>Motion Concept - Change Name of Women's Health to Pelvic and Women's Health APTA House of Delegates</u>
<u>MOTION CONCEPT – Establishment of a Digital Health and Artificial Intelligence (AI) Advisory Task Force APTA House of Delegates</u>
<u>Motion Concept - APTA to Advocate for Establishment of National Standards for Ethical Data Governance and Liability Frameworks in the Use of Digital Health Tools APTA House of Delegates</u>
<u>Motion Concept- DPT Tuition Recommendations to Mitigate Student Debt APTA House of Delegates</u>
<u>MOTION CONCEPT: Amend Standing Rule 2 APTA House of Delegates</u>
<u>Motion Concept: PHYSICAL THERAPY AS A DISTINCT, SELF-DETERMINED PROFESSION APTA House of Delegates</u>
<u>Motion Concept: RECOGNITION OF PHYSICAL THERAPY AS A DISTINCT, SELF-DETERMINED PROFESSION APTA House of Delegates</u>
<u>Motion Concept: APTA SHALL PUBLISH ON APTA.ORG ALL CPT CODES AND SUPPORTING RESOURCES WHICH REASONABLY FALL WITHIN PHYSICAL THERAPIST PRACTICE APTA House of Delegates</u>
<u>Motion Concept: APTA SHALL PURSUE DELETING THE CURRENT PROCEDURAL TERMINOLOGY (CPT) PHYSICAL THERAPY EVALUATION CODES AND REPLACING THEM WITH THE CPT EVALUATION & MANAGEMENT CODES APTA House of Delegates</u>
<u>Motion Concept: AMERICAL PHYSICAL THERAPY ASSOCIATION SUPPORTS REFORM OF THE AMERICAN MEDICAL ASSOCIATION CURRENT PROCEDURAL TERMINOLOGY PUBLICATION APTA House of Delegates</u>
<u>Motion Concept: Amend Dx by PTs APTA House of Delegates</u>

<u>Motion Concept: Implementation of CONSUMER PROTECTION THROUGH LICENSURE OF PHYSICAL THERAPISTS AND PHYSICAL THERAPIST ASSISTANTS HOD P06-19-51-57 APTA House of Delegates</u>
<u>Motion Concept: MEDICATION AND SUPPLMENTS IN PHYSICAL THERAPIST PRACTICE APTA House of Delegates</u>
<u>Motion Concept: Incidence, Prevalence of Disability among PT profession. APTA House of Delegates</u>
<u>Motion Concept: Clarify the Ethical/Legal Obligations Re: PT/PTA Relationship APTA House of Delegates</u>
<u>Motion Concept: Clarify the Ethical/Legal Obligations Re: PT/PTA Relationship APTA House of Delegates</u>
<u>Motion Concept: Clinician Consumer Education for Environmental Health APTA House of Delegates</u>
<u>MOTION CONCEPT: AMEND POSITION ON EVIDENCE-BASED PRACTICE APTA House of Delegates</u>
<u>Motion Concept - Rescind RC 30-03 OPPOSITION TO PHYSICIAN OWNERSHIP OF PHYSICAL THERAPIST SERVICES APTA House of Delegates</u>
<u>MOTION CONCEPT from New Mexico: Resolution Statement: Integrating Social Determinants of Health (SDOH) into Physical Therapy Practice, Advocacy, Education, and Research APTA House of Delegates</u>
<u>Motion Concept: Charge APTA with creating resources for implementing family forward policies and practices. APTA House of Delegates</u>
<u>Motion Concept: APTA'S PARAMOUNT AND OVERARCHING PRIORITY IS TO IMPROVE PAYMENT FOR PHYSICAL THERAPIST AND PHYSICAL THERAPIST ASSISTANT SERVICES APTA House of Delegates</u>
<u>Motion Concept - Amendment to Entry Point Provider Position Statement APTA House of Delegates</u>
<u>Motion Concept - Position Statement on Prior Authorization and Utilization Review APTA House of Delegates</u>
<u>Motion concept: Importance of Research to the PT Profession APTA House of Delegates</u>
<u>Motion Concept: R.E.A.C.H. Task Force – Residency & Fellowship Expansion and Access for Community Healthcare APTA House of Delegates</u>
<u>Motion Concept: Access to and Payment for Physical Therapist Services for People with Behavioral and Mental Health Conditions APTA House of Delegates</u>
<u>Motion Concept: Governance Transparency and Progress Tracking System APTA House of Delegates</u>

Motion Concept: APTA Support for Direct-Pay (Cash-Based) Physical Therapy Practice Models | APTA House of Delegates

Motion Concept: Recognizing the Doctor of Physical Therapy (DPT) as the Terminal Degree for the Profession | APTA House of Delegates