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APTANJ Support for Dry Needling in New Jersey

The American Physical Therapy Association of New Jersey supports the successful passage of dry needling legislation (S431/A392) to, once again, allow qualified and competent physical therapists to performing this technique in New Jersey.

- We are seeking a legislative solution to permanently recognize that dry needling is within the physical therapy scope of practice.
- Patients currently receiving dry needling that have experienced positive outcomes will no longer have this technique after September 1 which means that they will have to find alternative ways to manage their pain which may include opioids.
- We are not coming to the legislature with a new and revolutionary technique, but rather a tool in the "Physical Therapy Toolkit" that PTs have been using effectively for the past eight years in New Jersey safely.
- Physical therapists are performing dry needling in more than 30 states and have an average of 55 hours of approved continuing education based upon competency. PTs must pass a hands-on examination through the course and a written test before receiving their certificate.
- By having dry needling in statute, patients will be able to continue to receive an
 effective form of non-narcotic pain relief administered by a trained, qualified
 physical therapist.
- APTANJ believes that the patient should have access and choice in health care.
- Since 2009 in the state of New Jersey, the NJ State Board of Physical Therapy
 Examiners has not disciplined a single NJ-licensed physical therapist for practicing
 dry needling irresponsibly.

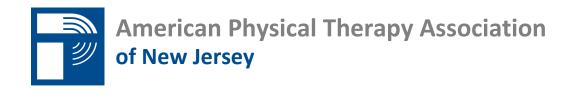
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- Physical Therapist bring pain management solutions, such as dry needling, that are non-pharmalogical to their patients. As stated in the NJ Attorney General's opinion "Because these tools are within the scope of practice of acupuncturists does not foreclose their use by other practitioners if the Legislature has clearly signaled its intention to allow such practice."
- All current graduates of an accredited physical therapy program hold a Doctor of Physical Therapy degree and must take continuing education courses and demonstrate competency in various professional areas including their preference to use dry needling.
- There are currently five NJ-based colleges with Physical Therapy Doctoral Programs (Kean University, Rutgers Newark, Rutgers Stratford, Seton Hall University and Stockton University). In order to be accepted into one of these programs, one must possess a degree in the biological sciences. Several of these universities have introduced their students to dry needling.

APTANJ 2009-2018 Timeline of Legislative Activity

Sept 2009	Dry Needling was deemed to be within the scope of physical therapy practice by the New Jersey State Board of Physical Therapy Examiners (NJSBPTE).
Mar 2012	New Jersey Acupuncture Examining Board (NJAEB) stated, "that the practice of dry needling is the practice of acupuncture, and as such any physical therapist who performs dry needling is in violation of the statute."
Early/Mid 2012	NJ Attorney General was asked by both Boards to render an opinion as to whether dry needling is the unlicensed practice of acupuncture.
Jul 2013	APTANJ introduced S2923/A4304, which "Revises statutes regarding practice of physical therapy" and included the protection of intramuscular manual therapy (also known as dry needling) as one of the updates. The bills were referred to the Assembly Regulated Professions Committee and the Senate Commerce Committee respectively.



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Jan 2014	With no movement on S2923/A4304, identical bills were reintroduced for the 216 th Legislative Session and given bill numbers: S874/A1648 respectively. Once again, they were referred to the Assembly Regulated Professions Committee and the Senate Commerce Committee.
Aug 2014	APTANJ established the Dry Needling Task Force, with the goal of providing information, resources and educational material in support of dry needling in New Jersey.
May 2015	APTANJ's lobbyist was able to get a hearing scheduled in the Assembly Regulated Professions Committee and A1648 was successfully released by a vote of 7 (Yes), 0 (No) and 1 (Abstains). Based on our testimony, the Assembly Regulated Professions Committee understood the difference between dry needling and acupuncture and voted in our favor.
May 2015	APTANJ requested that S874 be heard in the Senate Commerce Committee. Despite many meetings with committee members to explain the benefits the bill offers, including dry needling, the committee chair repeatedly denied the request. We were told that our proposed bill had been posted several times for consideration in the Senate Commerce Committee, but was withdrawn prior to the agenda being posted publicly.
July 2015	The Human Resources Research Organization (HumRRo) issues a 47-page report stating that "86% of the knowledge requirements needed to be competent in dry needling is acquired during the course of PT entry-level education, including knowledge related to evaluation, assessment, diagnosis and plan of care development, documentation, safety, and professional responsibilities."
Oct 2015	APTANJ campaigned to encourage PTs and their patients to contact the Chair of the Senate Commerce Committee and demand that the bill be posted for a committee hearing; before the January 2016 end of the 216 th legislative session. Despite the hundreds of phone calls, emails and faxes, the Committee Chair still refused to post the bill before the session ended and we were forced to start over with the entire Practice Act, yet again.
Feb 2016	Bills S1315/A1839 were introduced in the 217 th Legislative Session, this time without the inclusion of dry needling. We understood that there were other pressing issues in the bill that were being held up because of the dry needling saga. That same month, with the exclusion of dry needing, A1839 reported out of the Assembly Regulated Professions Committee with a vote of 7 (Yes), 0 (No) and 1 (Abstains).
Nov 2016	The Senate President replaced the Chair of the Senate Commerce Committee. APTANJ had internal discussions about whether to insert dry needling back into S1315/A1839, but the Council of Directors made the decision to keep it out since its inclusion would further delay current efforts. Plus, the NJ Attorney General had still not provided an

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	opinion on dry needing and there was no evidence to suggest that an opinion was forthcoming.
Feb 2017	Attorney General's office finally handed down its opinion. In the written opinion dated February 9, 2017, Assistant Attorney General Sharon M. Joyce stated:
	under the current statutory construct, physical therapists are not authorized to engage in the practice of dry needling.
	Accordingly you are advised that under the current statute, physical therapists are not authorized to engage in dry needling or intramuscular stimulation.
Late Feb 2017	The Senate Commerce Committee passed S1315 by a vote of 6 (Yes), 0 (No) and 0 (Abstains)
May 2017	Letters from the NJSBPTE were sent to PT licensees notifying them that after September 1, 2017, dry needling can no longer be provided by PTs in New Jersey.
May 2017	S1315 passed a full Senate vote of 36 (Yes), 0 (No), 0 (Abstains).
July 2017	Governor Christie signs Physical Therapy Practice Act (S1315)
December 2017	S3591/A5256 which Permits certain physical therapists to perform Dry needling is introduce during the lame duck session of the legislature
January 2018	New Jersey's 56th Governor Phil Murphy is sworn in succeeding Chris Christie.
January 2018	S431/A392 which Permits certain physical therapists to perform Dry needling is reintroduced for the new legislative session.
February 2018	S431 reports out of the Senate Commerce Committee by a 3-2 vote and is referred to the Senate Budget and Appropriations Committee. The two dissenting votes (Sens. Kean and Cardinale) had concerns with the hours of training a PT needs to have in order to perform dry needling; not that dry needling and acupuncture are the same.
March 2018	Asm. Chris DePhillips agrees to become a co-sponsor in the Assembly which gives A392 bipartisan support.
April 2018	APTANJ meets with acupuncture association in hope of reaching a compromise on the hours of training a PT needs to perform dry needling.