

STATE OF NEVADA

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Executive Director

JENNIFER DE ROSE
Licensing Coordinator

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Board Investigator/Clinical Advisor

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BOARD MEETING MINUTES November 21, 2025

Item 1. Call to Order, Confirmation of Quorum

The meeting was called to order at 9:04 a.m. by Board Chair Michael Laymon.

Roll Call:

Board Members Present: Michael Laymon, PT, Board Chair; Gina McDade, PTA, Vice-Chair; Louis Hillegass, PT, Board Member; Joe Indrieri, PT, Board Member; Anita Wagner, Public Member

Board Members Absent: None

Board Staff: Charles Harvey, Executive Director; Deborah Dieter, Board Investigator; Deanna Irby, Board Operations Support Specialist; Jennifer De Rose, Licensing Coordinator.

Legal Counsel: Joseph Ostunio, Deputy Attorney General

A quorum was confirmed.

Item 2. Mission Statement

Chair Laymon read the Nevada Physical Therapy Board's mission statement, noting the Board's role in protecting and promoting the health and safety of Nevadans through evidence-based physical therapy regulation, including

education, communication, licensure, legislation, regulation, and enforcement.

Item 3. Public Comment (First Period)

Chair Laymon opened the first period of public comment. Instructions were given for participation via Microsoft Teams and telephone.

Comment – APTA Nevada:

Speaker: Susan Priestman, past President and current Legislative Chair, APTA Nevada. Ms. Priestman expressed the Association’s desire to align with the Board on shared public policy interests, particularly: access to care, workforce issues, supporting practice at the highest scope, and protecting the scope of practice. She indicated APTA Nevada’s interest in collaborating with the Board on these issues.

No additional public comment was offered. Public comment was closed.

Item 4. Board Member / Committee Reports and Updates

4B. Government Relations – Tri Strategies. Item taken out of order.

Speaker: Paul Klein, Tri Strategies. Mr. Klein provided a legislative update concerning the recent legislative special session: SB5 – Healthcare Workforce Grant Program: Creates a statewide grant program to recruit and retain healthcare providers in shortage areas; PTs and PTAs are not named specifically, but could be included under its broad scope for rural and underserved recruitment, training, or retention projects. Proposed Regulation – Nevada Department of Business and Industry (B&I): B&I has proposed a regulation to standardize licensing board operations under the Office of Boards and Commissions. The proposal includes additional reporting and accountability measures; applicability includes the Nevada Physical Therapy Board. Mr. Klein, Vice Chair McDade, and another Tri Strategies representative (Eddie Abelsor) met with Deputy Director Nikki Haig to review questions and concerns, particularly potential duplicative reporting and administrative burden, given the Board’s recognized efficiency and national awards. An upcoming official meeting of the Nevada Boards and Commissions and Council of Standards regarding the regulation was noted for Tuesday, November 25, 1:00 p.m., with in-person and teleconference options. Mr. Klein indicated a written report would be provided separately for the full list of bills considered and concluded his remarks.

4A. Nevada Physical Therapy Association / APTA Nevada

Speaker: Jessie Fisher (APTA Nevada). Key points reported:

Leadership Changes: New President: Jennifer Nash. New Secretary: Jessie Fisher. New Membership Director: John McDonald. Thanks were extended to outgoing leaders, including past board member Susan Priestman and Katie Landier.

Education: Annual meeting held in October. Two lab-based CE courses were delivered on handheld dynamometry and BPPV. 15 hours of CE completed over the year addressing the Board's DEI requirement. No educational programming in December; activities resume in January.

Membership / Mentorship: APTA Nevada mentorship program application period closes November 25. John McDonald and Dustin Clow are working with Executive Director Harvey to assume and continue the Board's previously established mentorship and observation hours program for aspiring PT students.

Ethics / Bylaws: APTA House of Delegates adopted a new combined Code of Ethics for PTs and Standards of Ethical Conduct for PTAs into a single comprehensive document, effective January 1, 2026; to be posted on APTA's policies page.

Legislative Activity: APTA Nevada will continue its contract with Paul Young of Tom Clark Solutions. The association is engaged in monitoring SB5 and will focus on raising PAC/tax funds for the 2027 legislative session, with priorities of Medicaid reimbursement and administrative burden reduction.

The Board thanked Ms. Fisher for the report.

4C. B&I Oversight Regulation – Meeting Debrief

Vice Chair McDade reported on her meeting with Deputy Director Nikki Haig regarding the proposed B&I oversight regulation: The Board had prepared and shared a list of concerns with the proposal, particularly potential duplication of existing reporting and added workload that could reduce efficiency in an already high-performing, award-winning board office. Deputy Director Haig emphasized: The intent was not to overburden boards or reduce efficiency, but to have uniform accountability standards that apply to all boards, not just a subset. The Board would be able to request extensions for required filings as needed through simple communication with her office. Vice Chair McDade highlighted the Board's recognition by FSBPT for regulatory efficiency and Director Harvey's award for service excellence, reinforcing the Board's exemplary status. The Board will have the opportunity to determine its position and participation in the November 25 meeting regarding the proposal.

4D. Advisory Committee on Continuing Competence (ACCC)

Report by Vice Chair McDade: The ACCC continues to function efficiently; CE course approvals are being processed promptly and regularly, often within 1–2 days for those within delegated authority to staff. Krysta Boyd, ACCC Chair, attended FSBPT’s Annual Education Meeting in October alongside Vice Chair McDade. Attendance was characterized as highly valuable for understanding regulation, FSBPT services, and networking with national peers. The ACCC and Board discussed the FSBPT “Healthy Practice Resource” (HPR/HRI): A series of 10 modules on practitioner wellness and healthy practice (mental health, wellness, stress, burnout, practice climate, etc.), potentially eligible for CE credit. The resource aims to support practitioners' well-being as a component of public protection.

Motion: Vice Chair McDade moved that the Nevada Physical Therapy Board adopt the FSBPT Healthy Practice Resource (HPR/HRI) as a Board-supported resource.

Second: Member Wagner.

Vote: Motion passed unanimously.

4E. FSBPT Delegate Report and National Awards

Vice Chair McDade, serving as the Board’s delegate to FSBPT, provided a detailed report from FSBPT’s Annual Meeting: Key educational themes and sessions included: Multi-board discussions (e.g., veterinary and physical therapy boards) regarding evolving practice and regulation. Boundary violations and informed consent remain major regulatory topics. Persistent national gaps in PT education regarding PTA roles, scope, and supervision; concern that many PT programs inadequately prepare graduates to work effectively with PTAs.

Legislator–board panel discussion: Legislators from multiple states (including Colorado, another likely Idaho) emphasized they want stories from boards and licensees, not just data, when evaluating proposed legislation—especially stories illustrating patient harm or benefit. The importance of timely communication, well ahead of hearings, was highlighted.

Colorado funeral board example: Colorado’s disbanding of the funeral board led to egregious misconduct in the funeral industry, including mishandling of human remains and fraudulent provision of non-human material (e.g., cat litter/cement) as cremains, and illicit sale of body parts. Catastrophic events prompted the re-establishment of the funeral board and underscored the essential role of regulatory boards in public protection.

AI and data privacy presentation: A patient recounted discovering that her PT had recorded all treatment sessions using a phone-based AI transcription without her knowledge or consent. She learned that her state was a single-party consent state for in-person recording, giving her limited leverage over

recordings made without her explicit permission. Data from the recordings were stored and processed in multiple formats, reviewed by humans, and were difficult to erase. The technology vendor was not responsive to her as a patient, viewing their duty primarily to the purchasing clinic. The presentation raised serious concerns about privacy, data storage policies, and the legal/ethical obligations of providers using AI-enabled tools. Upon returning, Vice Chair McDade confirmed that Nevada is also a single-party consent state for in-person recording. Investigator Dieter clarified Nevada's consent rules for recording: single-party consent applies in person; two-party consent applies to telephone calls, consistent with federal rules.

FSBPT leadership elections and appointments: FSBPT Board positions: President: Dave Relling (re-elected). Vice President: Michele Forman (reelected). Nominating Committee member: Mario Baker. CBA Chair: Missy Anthony. FSBPT CEO transition: William Hatherall is retiring. Susan Newman, previously in FSBPT leadership, has been selected as the new CEO.

FSBPT national awards:

Executive Director Charles Harvey received FSBPT's Outstanding Service Award for Excellence in Service. The Nevada Physical Therapy Board received FSBPT's 2025 Excellence in Regulation Award for significant accomplishments in increasing public protection for consumers of physical therapy services in Nevada. Certificates were presented at the FSBPT meeting and displayed to the Board.

4E. Legal Counsel / Office of Attorney General – Rate Increase

Deputy Attorney General Joseph Ostunio reported: No major legal updates for this meeting. A significant disciplinary hearing is expected on the next meeting agenda; it may be lengthy and involve expert testimony. Additional future disciplinary hearings may be “stacked” to address a backlog. The Office of the Attorney General recently implemented a rate increase; Board staff and counsel had limited details beyond receipt of notice.

Item 5. Review and Discussion Regarding Pending Licensure Application

Applicant: Molly Vaughan (PT) – DUI Disclosure

Ms. Vaughan appeared via video. She has an existing temporary Nevada license, previously approved administratively by Director Harvey and the Board Chair, pending Board review. She disclosed and discussed: A first-time DUI offense in Alaska on September 5, 2025, currently pending with a hearing scheduled for December 23, 2025. She is seeking a diversion program for first-time offenders in Alaska through her attorney and the district attorney.

She relocated to Nevada specifically for treatment and recovery and has completed a 45-day inpatient program. Resides in a sober living environment with required daily AA meetings, curfew, and random testing. Is enrolled in an intensive outpatient program (IOP) three days per week, three hours per session, with group and weekly one-on-one therapy with an addiction-specialized mental health provider, expected through February 25, followed by 5 additional weeks of less intensive outpatient therapy. Ms. Vaughan practices as a board-certified pediatric PT with a specialty in pediatric pelvic health and is currently practicing in Nevada under a temporary license. She expressed gratitude for the opportunity to receive treatment and to continue serving Nevada patients, and described possible long-term plans either to return to Alaska (where her spouse and children currently reside) or to permanently relocate to Nevada, depending on treatment and family decisions.

Board discussion: Board members asked clarifying questions regarding her current practice status in Nevada and her tentative long-term plans. Board members commended Ms. Vaughan's engagement in recovery.

Motion: Member Halliges moved to approve Ms. Vaughan's application for full Nevada PT licensure.

Second: Member Indrieri

Chair Laymon clarified that the motion was to approve "full licensure."

Vote: Motion passed unanimously.

Ms. Vaughan thanked the Board; the Chair encouraged her to continue her recovery and noted the need for pediatric pelvic floor PTs in Nevada.

Item 6. Annual Audit of Board Financials

Executive Director Harvey presented the draft annual financial audit prepared by Campbell Jones Cohen, CPAs, for the most recent fiscal year: The audit is essentially complete; the Board received a draft that has been revised twice, and the final is expected by the end of the month for submission to the Governor's Office and Legislative Counsel Bureau. The audit is required under NRS 218G.400, which requires a professional licensing board to undergo an annual or biennial audit by a CPA or public accountant. Approximately three months of staff time are required each year to support the audit. Audit scope includes: financials; licensure records; bank statements; revenues and expenditures; credit card and check transactions; board loans; leases and contracts; disciplinary actions; insurance; deferred revenue; policies; payroll and benefits; vacation usage/accruals; and board member training. The audit reported no material findings.

Board member training:

Director Harvey noted the Attorney General's Office provides board member training modules (previously in person, currently via video). The proposed B&I regulation likely will require boards both to ensure training and to maintain records of completion. Board members were asked to notify staff when they complete these trainings (or provide certificates) so that staff can maintain documentation. New training videos are expected after the special session, likely by February.

Motion: Member Wagner moved to accept the annual audit of Board financials prepared by Campbell Jones Cohen, CPAs.

Second: Vice Chair McDade.

Vote: Motion passed unanimously.

Item 7. Board Operations Report and Consent Agenda

Director Harvey presented the Board Operations Report for the preceding two months: Active licensees: Total: 3,657 licensees. 2,696 PTs. 961 PTAs.

Approximately 292 licensees hold military/veteran/spouse status.

Licensure processing: 349 licenses issued year to date. Processing time has been improved to approximately 1–2 days for complete applications, after staff processing and executive director review. Customer satisfaction survey results from FSBPT (post-NPTE applicants): Results for the first three quarters of 2025 were reviewed; some negative responses are believed to be tied to fingerprint/background check delays rather than Board processing.

Continuing competence audit: A random subset of renewing licensees was audited for compliance with CE requirements. There is ongoing confusion among licensees about the Board's DEI requirement and how to locate and report approved DEI courses in CE Broker. Staff and ACCC will address this through outreach and social media messaging. Social media and outreach: The Board has launched a Facebook page and will expand to additional platforms to improve communication about requirements, CE, and initiatives. PT Compact integration: Work continues with the software vendor and the PT Compact Commission to implement compact privilege issuance. A soft launch date of January 1 remains the goal. The Board discussed that compact licensees' home states are responsible for fingerprint/background checks; Nevada will rely on the home state's compliance.

Other consent agenda items included: Draft meeting minutes from the September 5, 2025 Board meeting. Ratification of PT and PTA licenses approved since the prior meeting. Ratification of ACCC actions on CE course approvals. The Board also discussed DEI CE obtained through employers or payers: ACCC clarified that employer-provided DEI trainings may satisfy the Board's DEI CE requirement if licensees submit the Board's designated DEI course form and supporting certificate through CE Broker. Board members recommended proactive communication through social media to reduce

unnecessary licensee expenses and clarify that employer-provided DEI content can qualify.

Motion: Vice Chair moved to approve Consent Agenda Item 7, including: Board Operations Report; draft minutes of September 5, 2025; ratification of PT/PTA licenses; and ratification of ACCC actions.

Second: Member Wagner.

Vote: Motion passed unanimously.

Item 8. Disciplinary Matters
Case No. 2019 10 – Request for Dismissal

Deputy Attorney General Joe Ostunio reported on Case 2019 10: The Board reached a negotiated agreement with the respondent that included recovery of essentially all investigative costs and attorneys' fees. Given the agreement, anticipated length, and resource demands of a full hearing, and the deterrent effect of the settlement, counsel recommended dismissal of the formal disciplinary case.

Motion: Vice Chair McDade moved to dismiss Case 2019 10.

Second: Anita Wagner.

Vote: Motion passed unanimously.

Item 9. Applications / Continuing Competence – Course Actions
9A. Master Dry Needling – Pelvic Floor Home Study (TMR Seminars)

The Board considered the ACCC's request for Board direction on a course application: "Master Dry Needling Pelvic Floor Home Study Online Course" submitted by TMR Seminars.

Discussion: ACCC previously raised concerns about approving dry needling courses that are fully or primarily home study/online, including a prior Level 1 course. For this pelvic floor course, Board members expressed concern that the documentation lacked a clear description of the in-person laboratory component and post-course competency assessment. Dry needling, especially of the pelvic floor, presents a significant risk if anatomical depth and structures are not verified under expert supervision. Written testing or remote formats alone are not sufficient to ensure competency in such high-risk techniques. Board members indicated they could support a hybrid model only if there were robust, clearly described in-person lab hours with supervised, documented skill checks; those expectations were not met in the current submission.

Motion: Vice Chair McDade moved to deny approval of the "Master Dry Needling Pelvic Floor Home Study Online Course" (TMR Seminars) as

submitted, citing the authority and criteria in the ACCC White Paper, Section C.1.S, and NRS/NAC 640.450, as referenced in agenda item 9A.i.

Second: Member Indrieri.

Vote: Motion passed unanimously.

Course approval was denied; the course sponsor may resubmit with appropriate in-person lab and assessment details if desired.

9B. Audit Frequency – Annual vs. Biennial

The Board revisited the statutory option under NRS 218G.400 to conduct either annual or biennial audits.

Director Harvey summarized: For approximately the past eight years, the Board has conducted annual audits (at the suggestion of the Interim Finance Committee), all with clean findings. Strong internal financial controls are in place, including: Segregation of duties for payments, receivables, and bookkeeping. Monthly reconciliation of accounts by the Executive Director and Treasurer. Monthly review of expenditures by the Treasurer. Presentation of financial statements for Board review at each regular meeting. Annual external audits cost approximately \$13,500 per year. Shifting to a biennial audit would: Remain compliant with statute. Reduce cost by approximately 50% over time. Continue to be supported by robust internal controls between audits. The current audit contract with Campbell Jones Cohen runs through December 31, 2026. Staff recommended completing the scheduled 2026 audit under that contract, then moving to a biennial schedule, with the next audit in 2028 (covering FY 2026–27).

Treasurer report: Treasurer Anita Wagner confirmed that monthly bank reconciliations with staff have gone smoothly and that a biennial external audit cycle would be an efficient use of resources without compromising oversight.

Motion: Member Halliges moved that, following the completion of the 2026 audit under the current contract, the Board transition from annual to biennial financial audits.

Second: Member Wagner.

Vote: Motion passed unanimously.

9C. PT Compact Commission – Selection of Delegate

The Board considered the selection of a delegate to the PT Compact Commission.

Discussion: Given that the Executive Director is responsible for implementing the operational and programmatic components of the PT Compact in Nevada

and coordinating with the Commission and software vendors, Board members agreed it is most efficient for the Executive Director to serve as delegate.

Motion: Member Wagner moved to appoint Executive Director Charles Harvey as the Nevada PT Compact Commission delegate.

Second: Vice-Chair McDade.

Vote: Motion passed unanimously.

9D. Selection of 2026 Board Meeting Dates

The Board established regular meeting dates for calendar year 2026 (all at 9:00 a.m. PT; locations to be determined and noticed):

Friday, January 16, 2026

Friday, March 6, 2026

Friday, May 8, 2026

Friday, July 17, 2026

Friday, September 11, 2026

Friday, November 6, 2026

Motion: Vice Chair McDade moved to approve the 2026 meeting dates as noted.

Second: Member Wagner.

Vote: Motion passed unanimously.

Item 10. Strategic Plan Updates

Committee members reported minimal changes at this time. One strategic outreach initiative concerns the distribution of a Board-developed informational poster to workplaces (e.g., clinics, hospitals). The Board plans to email the poster to all licensees and request that employers and licensees voluntarily print and post it in their facilities. Director Harvey confirmed staff can distribute the poster via mass email to licensees once final content is confirmed.

No formal action was taken.

Item 11. Roundtable / Board Member Comments

Board members offered general comments and potential future topics: Healthy Practice Resource (HPR/HRI) clarification: Vice Chair McDade read into the record ACCC Chair Krista's summary used in the FSBPT presentation to more fully explain the Board's rationale for adopting the HPR/HRI, emphasizing commitment to: Practitioner well-being as part of competence. Use of evidence-based tools to support safe, ethical, effective practice.

Practice Act review: The Board has formed three workgroups to review Nevada's Practice Act against the FSBPT Model Practice Act, with an assigned FSBPT liaison. Once all nine committee members are confirmed, work will

proceed section by section. Primary care provider status and scope issues: Board members discussed emerging policy in other states (e.g., Utah, Colorado, Montana) where PTs are recognized as primary care providers and can perform school physicals, with associated payer and co-pay implications. The Board's legislative committee may consider such concepts in future statutory or regulatory proposals, balancing benefits with anticipated opposition and legislative bandwidth.

Education and modalities: Concerns were raised about some PT programs teaching modalities that are outdated or not strongly evidence-based, while newer, more effective (but costly and sometimes non-reimbursed) modalities are underrepresented. Discussion noted CAPTE's evolving language, giving programs more flexibility to align education with community needs and evidence while maintaining accreditation standards.

No formal motions were made during the roundtable.

Item 12. Board Chair's Report

The Chair briefly noted that, given the Board's growing public presence and the B&I oversight developments, the Board will continue to emphasize public protection, transparency, and alignment with best regulatory practices.

Item 13. Public Comment (Second Period)

The Chair opened a second period of public comment with the same access information as the first. No members of the public offered comment. The public comment period was closed.

Item 14. Adjournment

With no further business, the Chair adjourned the meeting at approximately 11:00 a.m.