

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Illinois Athletic Trainers Practice Act is
5 amended by adding Section 4.5 as follows:

6 (225 ILCS 5/4.5 new)

7 Sec. 4.5. Use of dry needling.

8 (a) For the purpose of this Act, "dry needling", also
9 known as intramuscular therapy, means an advanced needling
10 skill or technique limited to the treatment of myofascial
11 pain, using a single use, single insertion, sterile filiform
12 needle (without the use of heat, cold, or any other added
13 modality or medication), that is inserted into the skin or
14 underlying tissues to stimulate trigger points. Dry needling
15 may apply theory based only upon Western medical concepts,
16 requires an examination and diagnosis, and treats specific
17 anatomic entities selected according to physical signs. "Dry
18 needling" does not include the teaching or application of
19 acupuncture described by the stimulation of auricular points,
20 utilization of distal points or non-local points, needle
21 retention, application of retained electric stimulation leads,
22 or other acupuncture theory.

23 (b) An athletic trainer licensed under this Act may only

1 perform dry needling after completion of requirements, as
2 determined by the Department by rule, that meet or exceed the
3 following: (1) 50 hours of instructional courses that include,
4 but are not limited to, studies in the musculoskeletal and
5 neuromuscular system, the anatomical basis of pain mechanisms,
6 chronic pain, and referred pain, myofascial trigger point
7 theory, and universal precautions; (2) completion of at least
8 30 hours of didactic course work specific to dry needling; (3)
9 successful completion of at least 54 practicum hours in dry
10 needling course work; (4) completion of at least 200
11 supervised patient treatment sessions; and (5) successful
12 completion of a competency examination. Dry needling shall
13 only be performed by a licensed athletic trainer upon
14 referral.

15 Section 10. The Illinois Occupational Therapy Practice Act
16 is amended by changing Section 2 and by adding Section 3.7 as
17 follows:

18 (225 ILCS 75/2) (from Ch. 111, par. 3702)

19 (Section scheduled to be repealed on January 1, 2024)

20 Sec. 2. Definitions. In this Act:

21 (1) "Department" means the Department of Financial and
22 Professional Regulation.

23 (2) "Secretary" means the Secretary of the Department of
24 Financial and Professional Regulation.

1 (3) "Board" means the Illinois Occupational Therapy
2 Licensure Board appointed by the Secretary.

3 (4) "Occupational therapist" means a person initially
4 registered and licensed to practice occupational therapy as
5 defined in this Act, and whose license is in good standing.

6 (5) "Occupational therapy assistant" means a person
7 initially registered and licensed to assist in the practice of
8 occupational therapy under the supervision of a licensed
9 occupational therapist, and to implement the occupational
10 therapy treatment program as established by the licensed
11 occupational therapist.

12 (6) "Occupational therapy" means the therapeutic use of
13 purposeful and meaningful occupations or goal-directed
14 activities to evaluate and provide interventions for
15 individuals, groups, and populations who have a disease or
16 disorder, an impairment, an activity limitation, or a
17 participation restriction that interferes with their ability
18 to function independently in their daily life roles, including
19 activities of daily living (ADLs) and instrumental activities
20 of daily living (IADLs). Occupational therapy services are
21 provided for the purpose of habilitation, rehabilitation, and
22 to promote health and wellness. Occupational therapy may be
23 provided via technology or telecommunication methods, also
24 known as telehealth, however the standard of care shall be the
25 same whether a patient is seen in person, through telehealth,
26 or other method of electronically enabled health care.

1 Occupational therapy practice may include any of the
2 following:

3 (a) remediation or restoration of performance
4 abilities that are limited due to impairment in
5 biological, physiological, psychological, or neurological
6 processes;

7 (b) modification or adaptation of task, process, or
8 the environment or the teaching of compensatory techniques
9 in order to enhance performance;

10 (c) disability prevention methods and techniques that
11 facilitate the development or safe application of
12 performance skills; and

13 (d) health and wellness promotion strategies,
14 including self-management strategies, and practices that
15 enhance performance abilities.

16 The licensed occupational therapist or licensed
17 occupational therapy assistant may assume a variety of roles
18 in his or her career including, but not limited to,
19 practitioner, supervisor of professional students and
20 volunteers, researcher, scholar, consultant, administrator,
21 faculty, clinical instructor, fieldwork educator, and educator
22 of consumers, peers, and family.

23 (7) "Occupational therapy services" means services that
24 may be provided to individuals, groups, and populations, when
25 provided to treat an occupational therapy need, including the
26 following:

1 (a) evaluating, developing, improving, sustaining, or
2 restoring skills in activities of daily living, work, or
3 productive activities, including instrumental activities
4 of daily living and play and leisure activities;

5 (b) evaluating, developing, remediating, or restoring
6 sensorimotor, cognitive, or psychosocial components of
7 performance with considerations for cultural context and
8 activity demands that affect performance;

9 (c) designing, fabricating, applying, or training in
10 the use of assistive technology, adaptive devices, seating
11 and positioning, or temporary, orthoses and training in
12 the use of orthoses and prostheses;

13 (d) adapting environments and processes, including the
14 application of ergonomic principles, to enhance
15 performance and safety in daily life roles;

16 (e) for the occupational therapist or occupational
17 therapy assistant possessing advanced training, skill, and
18 competency as demonstrated through criteria that shall be
19 determined by the Department, applying physical agent
20 modalities, including dry needling, as an adjunct to or in
21 preparation for engagement in occupations;

22 (f) evaluating and providing intervention in
23 collaboration with the client, family, caregiver, or
24 others;

25 (g) educating the client, family, caregiver, or others
26 in carrying out appropriate nonskilled interventions;

1 (h) consulting with groups, programs, organizations,
2 or communities to provide population-based services;

3 (i) assessing, recommending, and training in
4 techniques to enhance functional mobility, including
5 wheelchair management;

6 (j) driver rehabilitation and community mobility;

7 (k) management of feeding, eating, and swallowing to
8 enable or enhance performance of these tasks;

9 (l) low vision rehabilitation;

10 (m) lymphedema and wound care management;

11 (n) pain management; and

12 (o) care coordination, case management, and transition
13 services.

14 (8) (Blank).

15 (9) "Address of record" means the designated address
16 recorded by the Department in the applicant's or licensee's
17 application file or license file as maintained by the
18 Department's licensure maintenance unit. It is the duty of the
19 applicant or licensee to inform the Department of any change
20 of address, and those changes must be made either through the
21 Department's website or by contacting the Department.

22 (Source: P.A. 98-264, eff. 12-31-13.)

23 (225 ILCS 75/3.7 new)

24 Sec. 3.7. Use of dry needling.

25 (a) For the purpose of this Act, "dry needling", also

1 known as intramuscular therapy, means an advanced needling
2 skill or technique limited to the treatment of myofascial
3 pain, using a single use, single insertion, sterile filiform
4 needle (without the use of heat, cold, or any other added
5 modality or medication), that is inserted into the skin or
6 underlying tissues to stimulate trigger points. Dry needling
7 may apply theory based only upon Western medical concepts,
8 requires an examination and diagnosis, and treats specific
9 anatomic entities selected according to physical signs. "Dry
10 needling" does not include the teaching or application of
11 acupuncture described by the stimulation of auricular points,
12 utilization of distal points or non-local points, needle
13 retention, application of retained electric stimulation leads,
14 or other acupuncture theory.

15 (b) An occupational therapist or occupational therapy
16 assistant licensed under this Act may only perform dry
17 needling after completion of requirements, as determined by
18 the Department by rule, that meet or exceed the following: (1)
19 50 hours of instructional courses that include, but are not
20 limited to, studies in the musculoskeletal and neuromuscular
21 system, the anatomical basis of pain mechanisms, chronic pain,
22 and referred pain, myofascial trigger point theory, and
23 universal precautions; (2) completion of at least 30 hours of
24 didactic course work specific to dry needling; (3) successful
25 completion of at least 54 practicum hours in dry needling
26 course work; (4) completion of at least 200 supervised patient

1 treatment sessions; and (5) successful completion of a
2 competency examination. Dry needling shall only be performed
3 by a licensed occupational therapist or licensed occupational
4 therapy assistant upon referral.

5 Section 15. The Illinois Physical Therapy Act is amended
6 by changing Sections 1, 1.2, and 1.5 as follows:

7 (225 ILCS 90/1) (from Ch. 111, par. 4251)

8 (Section scheduled to be repealed on January 1, 2026)

9 Sec. 1. Definitions. As used in this Act:

10 (1) "Physical therapy" means all of the following:

11 (A) Examining, evaluating, and testing individuals who
12 may have mechanical, physiological, or developmental
13 impairments, functional limitations, disabilities, or
14 other health and movement-related conditions, classifying
15 these disorders, determining a rehabilitation prognosis
16 and plan of therapeutic intervention, and assessing the
17 ongoing effects of the interventions.

18 (B) Alleviating impairments, functional limitations,
19 or disabilities by designing, implementing, and modifying
20 therapeutic interventions that may include, but are not
21 limited to, the evaluation or treatment of a person
22 through the use of the effective properties of physical
23 measures and heat, cold, light, water, radiant energy,
24 electricity, sound, and air and use of therapeutic

1 massage, therapeutic exercise, mobilization, dry needling,
2 and rehabilitative procedures, with or without assistive
3 devices, for the purposes of preventing, correcting, or
4 alleviating a physical or mental impairment, functional
5 limitation, or disability.

6 (C) Reducing the risk of injury, impairment,
7 functional limitation, or disability, including the
8 promotion and maintenance of fitness, health, and
9 wellness.

10 (D) Engaging in administration, consultation,
11 education, and research.

12 "Physical therapy" includes, but is not limited to: (a)
13 performance of specialized tests and measurements, (b)
14 administration of specialized treatment procedures, (c)
15 interpretation of referrals from physicians, dentists,
16 advanced practice registered nurses, physician assistants, and
17 podiatric physicians, (d) establishment, and modification of
18 physical therapy treatment programs, (e) administration of
19 topical medication used in generally accepted physical therapy
20 procedures when such medication is either prescribed by the
21 patient's physician, licensed to practice medicine in all its
22 branches, the patient's physician licensed to practice
23 podiatric medicine, the patient's advanced practice registered
24 nurse, the patient's physician assistant, or the patient's
25 dentist or used following the physician's orders or written
26 instructions, (f) supervision or teaching of physical therapy,

1 and (g) dry needling in accordance with Section 1.5. "Physical
2 therapy" does not include radiology, electrosurgery,
3 acupuncture, chiropractic technique or determination of a
4 differential diagnosis; provided, however, the limitation on
5 determining a differential diagnosis shall not in any manner
6 limit a physical therapist licensed under this Act from
7 performing an evaluation and establishing a physical therapy
8 treatment plan pursuant to such license. Nothing in this
9 Section shall limit a physical therapist from employing
10 appropriate physical therapy techniques that he or she is
11 educated and licensed to perform.

12 (2) "Physical therapist" means a person who practices
13 physical therapy and who has met all requirements as provided
14 in this Act.

15 (3) "Department" means the Department of Professional
16 Regulation.

17 (4) "Director" means the Director of Professional
18 Regulation.

19 (5) "Board" means the Physical Therapy Licensing and
20 Disciplinary Board approved by the Director.

21 (6) "Referral" means a written or oral authorization for
22 physical therapy services for a patient by a physician,
23 dentist, advanced practice registered nurse, physician
24 assistant, or podiatric physician who maintains medical
25 supervision of the patient and makes a diagnosis or verifies
26 that the patient's condition is such that it may be treated by

1 a physical therapist.

2 (7) (Blank).

3 (8) "State" includes:

4 (a) the states of the United States of America;

5 (b) the District of Columbia; and

6 (c) the Commonwealth of Puerto Rico.

7 (9) "Physical therapist assistant" means a person licensed
8 to assist a physical therapist and who has met all
9 requirements as provided in this Act and who works under the
10 supervision of a licensed physical therapist to assist in
11 implementing the physical therapy treatment program as
12 established by the licensed physical therapist. The patient
13 care activities provided by the physical therapist assistant
14 shall not include the interpretation of referrals, evaluation
15 procedures, or the planning or major modification of patient
16 programs.

17 (10) "Physical therapy aide" means a person who has
18 received on the job training, specific to the facility in
19 which he is employed.

20 (11) "Advanced practice registered nurse" means a person
21 licensed as an advanced practice registered nurse under the
22 Nurse Practice Act.

23 (12) "Physician assistant" means a person licensed under
24 the Physician Assistant Practice Act of 1987.

25 (13) "Health care professional" means a physician,
26 dentist, podiatric physician, advanced practice registered

1 nurse, or physician assistant.

2 (Source: P.A. 99-173, eff. 7-29-15; 99-229, eff. 8-3-15;
3 99-642, eff. 7-28-16; 100-201, eff. 8-18-17; 100-418, eff.
4 8-25-17; 100-513, eff. 1-1-18; 100-863, eff. 8-14-18; 100-897,
5 eff. 8-16-18.)

6 (225 ILCS 90/1.2)

7 (Section scheduled to be repealed on January 1, 2026)

8 Sec. 1.2. Physical therapy services.

9 (a) A physical therapist may provide physical therapy
10 services to a patient with or without a referral from a health
11 care professional.

12 (b) A physical therapist providing services without a
13 referral from a health care professional must notify the
14 patient's treating health care professional within 5 business
15 days after the patient's first visit that the patient is
16 receiving physical therapy. This does not apply to physical
17 therapy services related to fitness or wellness, unless the
18 patient presents with an ailment or injury.

19 (b-5) A physical therapist providing services to a patient
20 who has been diagnosed by a health care professional as having
21 a chronic disease that may benefit from physical therapy must
22 communicate at least monthly with the patient's treating
23 health care professional to provide updates on the patient's
24 course of therapy.

25 (c) A physical therapist shall refer a patient to the

1 patient's treating health care professional of record or, in
2 the case where there is no health care professional of record,
3 to a health care professional of the patient's choice, if:

4 (1) the patient does not demonstrate measurable or
5 functional improvement after 10 visits or 15 business
6 days, whichever occurs first, and continued improvement
7 thereafter;

8 (2) the patient was under the care of a physical
9 therapist without a diagnosis established by a health care
10 professional of a chronic disease that may benefit from
11 physical therapy and returns for services for the same or
12 similar condition after 30 calendar days of being
13 discharged by the physical therapist; or

14 (3) the patient's condition, at the time of evaluation
15 or services, is determined to be beyond the scope of
16 practice of the physical therapist.

17 (d) Wound debridement services may only be provided by a
18 physical therapist with written authorization from a health
19 care professional.

20 (e) A physical therapist shall promptly consult and
21 collaborate with the appropriate health care professional
22 anytime a patient's condition indicates that it may be related
23 to temporomandibular disorder so that a diagnosis can be made
24 by that health care professional for an appropriate treatment
25 plan.

26 (Source: P.A. 100-897, eff. 8-16-18.)

1 (225 ILCS 90/1.5)

2 (Section scheduled to be repealed on January 1, 2026)

3 Sec. 1.5. Dry needling.

4 (a) For the purpose of this Act, "dry needling", also
5 known as intramuscular therapy, means an advanced needling
6 skill or technique limited to the treatment of myofascial
7 pain, using a single use, single insertion, sterile filiform
8 needle (without the use of heat, cold, or any other added
9 modality or medication), that is inserted into the skin or
10 underlying tissues to stimulate trigger points. Dry needling
11 may apply theory based only upon Western medical concepts,
12 requires an examination and diagnosis, and treats specific
13 anatomic entities selected according to physical signs. Dry
14 needling does not include the teaching or application of
15 acupuncture described by the stimulation of auricular points,
16 utilization of distal points or non-local points, needle
17 retention, application of retained electric stimulation leads,
18 or ~~the teaching or application of~~ other acupuncture theory.

19 (b) A physical therapist or physical therapist assistant
20 licensed under this Act may only perform dry needling after
21 completion of requirements, as determined by the Department by
22 rule, that meet or exceed the following: (1) 50 hours of
23 instructional courses that include, but are not limited to,
24 studies in the musculoskeletal and neuromuscular system, the
25 anatomical basis of pain mechanisms, chronic and referred

1 pain, myofascial trigger point theory, and universal
2 precautions; (2) completion of at least 30 hours of didactic
3 course work specific to dry needling; (3) successful
4 completion of at least 54 practicum hours in dry needling
5 course work; (4) completion of at least 200 supervised patient
6 treatment sessions; and (5) successful completion of a
7 competency examination. Dry needling shall only be performed
8 by a licensed physical therapist or licensed physical
9 therapist assistant. A physical therapist licensed under this
10 Act may only perform dry needling under the following
11 conditions as determined by the Department by rule:

12 ~~(1) Prior to completion of the education under~~
13 ~~paragraph (2) of this subsection, successful completion of~~
14 ~~50 hours of instruction in the following areas:~~

15 ~~(A) the musculoskeletal and neuromuscular system;~~

16 ~~(B) the anatomical basis of pain mechanisms,~~
17 ~~chronic pain, and referred pain;~~

18 ~~(C) myofascial trigger point theory; and~~

19 ~~(D) universal precautions.~~

20 ~~(2) Completion of at least 30 hours of didactic course~~
21 ~~work specific to dry needling.~~

22 ~~(3) Successful completion of at least 54 practicum~~
23 ~~hours in dry needling course work approved by the~~
24 ~~Federation of State Boards of Physical Therapy or its~~
25 ~~successor (or substantial equivalent), as determined by~~
26 ~~the Department. Each instructional course shall specify~~

1 ~~what anatomical regions are included in the instruction~~
2 ~~and describe whether the course offers introductory or~~
3 ~~advanced instruction in dry needling. Each instruction~~
4 ~~course shall include the following areas:~~

5 ~~(A) dry needling technique;~~

6 ~~(B) dry needling indications and~~
7 ~~contraindications;~~

8 ~~(C) documentation of dry needling;~~

9 ~~(D) management of adverse effects;~~

10 ~~(E) practical psychomotor competency; and~~

11 ~~(F) the Occupational Safety and Health~~
12 ~~Administration's Bloodborne Pathogens standard.~~

13 ~~Postgraduate classes qualifying for completion of the~~
14 ~~mandated 54 hours of dry needling shall be in one or more~~
15 ~~modules, with the initial module being no fewer than 27~~
16 ~~hours, and therapists shall complete at least 54 hours in~~
17 ~~no more than 12 months.~~

18 ~~(4) Completion of at least 200 patient treatment~~
19 ~~sessions under supervision as determined by the Department~~
20 ~~by rule.~~

21 ~~(5) Successful completion of a competency examination~~
22 ~~as approved by the Department.~~

23 ~~Each licensee is responsible for maintaining records of~~
24 ~~the completion of the requirements of this subsection (b) and~~
25 ~~shall be prepared to produce such records upon request by the~~
26 ~~Department.~~

1 (c) (Blank). ~~A newly licensed physical therapist shall not~~
2 ~~practice dry needling for at least one year from the date of~~
3 ~~initial licensure unless the practitioner can demonstrate~~
4 ~~compliance with subsection (b) through his or her~~
5 ~~pre licensure educational coursework.~~

6 (d) (Blank). ~~Dry needling may only be performed by a~~
7 ~~licensed physical therapist and may not be delegated to a~~
8 ~~physical therapist assistant or support personnel.~~

9 (e) (Blank). ~~A physical therapist shall not advertise,~~
10 ~~describe to patients or the public, or otherwise represent~~
11 ~~that dry needling is acupuncture, nor shall he or she~~
12 ~~represent that he or she practices acupuncture unless~~
13 ~~separately licensed under the Acupuncture Practice Act.~~

14 (Source: P.A. 100-418, eff. 8-25-17.)