



Sen. Emil Jones, III

Filed: 4/27/2021

10200SB1078sam002

LRB102 04893 SPS 25908 a

1 AMENDMENT TO SENATE BILL 1078

2 AMENDMENT NO. _____. Amend Senate Bill 1078 by replacing
3 everything after the enacting clause with the following:

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

1 anatomic entities selected according to physical signs. "Dry
2 needling" does not include the teaching or application of
3 acupuncture described by the stimulation of auricular points,
4 utilization of distal points or non-local points, needle
5 retention, application of retained electric stimulation leads,
6 or other acupuncture theory.

7 (b) An athletic trainer licensed under this Act may only
8 perform dry needling after completion of requirements, as
9 determined by the Department by rule, that meet or exceed the
10 following: (1) 50 hours of instructional courses that include,
11 but are not limited to, studies in the musculoskeletal and
12 neuromuscular system, the anatomical basis of pain mechanisms,
13 chronic pain, and referred pain, myofascial trigger point
14 theory, and universal precautions; (2) completion of at least
15 30 hours of didactic course work specific to dry needling; (3)
16 successful completion of at least 54 practicum hours in dry
17 needling course work; (4) completion of at least 200
18 supervised patient treatment sessions; and (5) successful
19 completion of a competency examination. Dry needling shall
20 only be performed by a licensed athletic trainer upon
21 referral.

22 Section 10. The Illinois Occupational Therapy Practice Act
23 is amended by changing Section 2 and by adding Section 3.7 as
24 follows:

1 (225 ILCS 75/2) (from Ch. 111, par. 3702)

2 (Section scheduled to be repealed on January 1, 2024)

3 Sec. 2. Definitions. In this Act:

4 (1) "Department" means the Department of Financial and
5 Professional Regulation.

6 (2) "Secretary" means the Secretary of the Department of
7 Financial and Professional Regulation.

8 (3) "Board" means the Illinois Occupational Therapy
9 Licensure Board appointed by the Secretary.

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

13 (5) "Occupational therapy assistant" means a person
14 initially registered and licensed to assist in the practice of
15 occupational therapy under the supervision of a licensed
16 occupational therapist, and to implement the occupational
17 therapy treatment program as established by the licensed
18 occupational therapist.

19 (6) "Occupational therapy" means the therapeutic use of
20 purposeful and meaningful occupations or goal-directed
21 activities to evaluate and provide interventions for
22 individuals, groups, and populations who have a disease or
23 disorder, an impairment, an activity limitation, or a
24 participation restriction that interferes with their ability
25 to function independently in their daily life roles, including
26 activities of daily living (ADLs) and instrumental activities

1 of daily living (IADLs). Occupational therapy services are
2 provided for the purpose of habilitation, rehabilitation, and
3 to promote health and wellness. Occupational therapy may be
4 provided via technology or telecommunication methods, also
5 known as telehealth, however the standard of care shall be the
6 same whether a patient is seen in person, through telehealth,
7 or other method of electronically enabled health care.
8 Occupational therapy practice may include any of the
9 following:

10 (a) remediation or restoration of performance
11 abilities that are limited due to impairment in
12 biological, physiological, psychological, or neurological
13 processes;

14 (b) modification or adaptation of task, process, or
15 the environment or the teaching of compensatory techniques
16 in order to enhance performance;

17 (c) disability prevention methods and techniques that
18 facilitate the development or safe application of
19 performance skills; and

20 (d) health and wellness promotion strategies,
21 including self-management strategies, and practices that
22 enhance performance abilities.

23 The licensed occupational therapist or licensed
24 occupational therapy assistant may assume a variety of roles
25 in his or her career including, but not limited to,
26 practitioner, supervisor of professional students and

1 volunteers, researcher, scholar, consultant, administrator,
2 faculty, clinical instructor, fieldwork educator, and educator
3 of consumers, peers, and family.

4 (7) "Occupational therapy services" means services that
5 may be provided to individuals, groups, and populations, when
6 provided to treat an occupational therapy need, including the
7 following:

8 (a) evaluating, developing, improving, sustaining, or
9 restoring skills in activities of daily living, work, or
10 productive activities, including instrumental activities
11 of daily living and play and leisure activities;

12 (b) evaluating, developing, remediating, or restoring
13 sensorimotor, cognitive, or psychosocial components of
14 performance with considerations for cultural context and
15 activity demands that affect performance;

16 (c) designing, fabricating, applying, or training in
17 the use of assistive technology, adaptive devices, seating
18 and positioning, or temporary, orthoses and training in
19 the use of orthoses and prostheses;

20 (d) adapting environments and processes, including the
21 application of ergonomic principles, to enhance
22 performance and safety in daily life roles;

23 (e) for the occupational therapist or occupational
24 therapy assistant possessing advanced training, skill, and
25 competency as demonstrated through criteria that shall be
26 determined by the Department, applying physical agent

1 modalities, including dry needling, as an adjunct to or in
2 preparation for engagement in occupations;

3 (f) evaluating and providing intervention in
4 collaboration with the client, family, caregiver, or
5 others;

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

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

10 (i) assessing, recommending, and training in
11 techniques to enhance functional mobility, including
12 wheelchair management;

13 (j) driver rehabilitation and community mobility;

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

16 (l) low vision rehabilitation;

17 (m) lymphedema and wound care management;

18 (n) pain management; and

19 (o) care coordination, case management, and transition
20 services.

21 (8) (Blank).

22 (9) "Address of record" means the designated address
23 recorded by the Department in the applicant's or licensee's
24 application file or license file as maintained by the
25 Department's licensure maintenance unit. It is the duty of the
26 applicant or licensee to inform the Department of any change

1 of address, and those changes must be made either through the
2 Department's website or by contacting the Department.

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

4 (225 ILCS 75/3.7 new)

5 Sec. 3.7. Use of dry needling.

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

21 (b) An occupational therapist licensed under this Act may
22 only perform dry needling after completion of requirements, as
23 determined by the Department by rule, that meet or exceed the
24 following: (1) 50 hours of instructional courses that include,
25 but are not limited to, studies in the musculoskeletal and

1 neuromuscular system, the anatomical basis of pain mechanisms,
2 chronic pain, and referred pain, myofascial trigger point
3 theory, and universal precautions; (2) completion of at least
4 30 hours of didactic course work specific to dry needling; (3)
5 successful completion of at least 54 practicum hours in dry
6 needling course work; (4) completion of at least 200
7 supervised patient treatment sessions; and (5) successful
8 completion of a competency examination. Dry needling shall
9 only be performed by a licensed occupational therapist upon
10 referral.

11 Section 15. The Illinois Physical Therapy Act is amended
12 by changing Sections 1 and 1.5 as follows:

13 (225 ILCS 90/1) (from Ch. 111, par. 4251)

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

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

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

17 (A) Examining, evaluating, and testing individuals who
18 may have mechanical, physiological, or developmental
19 impairments, functional limitations, disabilities, or
20 other health and movement-related conditions, classifying
21 these disorders, determining a rehabilitation prognosis
22 and plan of therapeutic intervention, and assessing the
23 ongoing effects of the interventions.

24 (B) Alleviating impairments, functional limitations,

1 or disabilities by designing, implementing, and modifying
2 therapeutic interventions that may include, but are not
3 limited to, the evaluation or treatment of a person
4 through the use of the effective properties of physical
5 measures and heat, cold, light, water, radiant energy,
6 electricity, sound, and air and use of therapeutic
7 massage, therapeutic exercise, mobilization, dry needling,
8 and rehabilitative procedures, with or without assistive
9 devices, for the purposes of preventing, correcting, or
10 alleviating a physical or mental impairment, functional
11 limitation, or disability.

12 (C) Reducing the risk of injury, impairment,
13 functional limitation, or disability, including the
14 promotion and maintenance of fitness, health, and
15 wellness.

16 (D) Engaging in administration, consultation,
17 education, and research.

18 "Physical therapy" includes, but is not limited to: (a)
19 performance of specialized tests and measurements, (b)
20 administration of specialized treatment procedures, (c)
21 interpretation of referrals from physicians, dentists,
22 advanced practice registered nurses, physician assistants, and
23 podiatric physicians, (d) establishment, and modification of
24 physical therapy treatment programs, (e) administration of
25 topical medication used in generally accepted physical therapy
26 procedures when such medication is either prescribed by the

1 patient's physician, licensed to practice medicine in all its
2 branches, the patient's physician licensed to practice
3 podiatric medicine, the patient's advanced practice registered
4 nurse, the patient's physician assistant, or the patient's
5 dentist or used following the physician's orders or written
6 instructions, (f) supervision or teaching of physical therapy,
7 and (g) dry needling in accordance with Section 1.5. "Physical
8 therapy" does not include radiology, electrosurgery,
9 acupuncture, chiropractic technique or determination of a
10 differential diagnosis; provided, however, the limitation on
11 determining a differential diagnosis shall not in any manner
12 limit a physical therapist licensed under this Act from
13 performing an evaluation and establishing a physical therapy
14 treatment plan pursuant to such license. Nothing in this
15 Section shall limit a physical therapist from employing
16 appropriate physical therapy techniques that he or she is
17 educated and licensed to perform.

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

21 (3) "Department" means the Department of Professional
22 Regulation.

23 (4) "Director" means the Director of Professional
24 Regulation.

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

1 (6) "Referral" means a written or oral authorization for
2 physical therapy services for a patient by a physician,
3 dentist, advanced practice registered nurse, physician
4 assistant, or podiatric physician who maintains medical
5 supervision of the patient and makes a diagnosis or verifies
6 that the patient's condition is such that it may be treated by
7 a physical therapist.

8 (7) (Blank).

9 (8) "State" includes:

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

11 (b) the District of Columbia; and

12 (c) the Commonwealth of Puerto Rico.

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

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

26 (11) "Advanced practice registered nurse" means a person

1 licensed as an advanced practice registered nurse under the
2 Nurse Practice Act.

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

5 (13) "Health care professional" means a physician,
6 dentist, podiatric physician, advanced practice registered
7 nurse, or physician assistant.

8 (Source: P.A. 99-173, eff. 7-29-15; 99-229, eff. 8-3-15;
9 99-642, eff. 7-28-16; 100-201, eff. 8-18-17; 100-418, eff.
10 8-25-17; 100-513, eff. 1-1-18; 100-863, eff. 8-14-18; 100-897,
11 eff. 8-16-18.)

12 (225 ILCS 90/1.5)

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

14 Sec. 1.5. Dry needling.

15 (a) For the purpose of this Act, "dry needling", also
16 known as intramuscular therapy, means an advanced needling
17 skill or technique limited to the treatment of myofascial
18 pain, using a single use, single insertion, sterile filiform
19 needle (without the use of heat, cold, or any other added
20 modality or medication), that is inserted into the skin or
21 underlying tissues to stimulate trigger points. Dry needling
22 may apply theory based only upon Western medical concepts,
23 requires an examination and diagnosis, and treats specific
24 anatomic entities selected according to physical signs. Dry
25 needling does not include the teaching or application of

1 acupuncture described by the stimulation of auricular points,
2 utilization of distal points or non-local points, needle
3 retention, application of retained electric stimulation leads,
4 or ~~the teaching or application of~~ other acupuncture theory.

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

22 ~~(1) Prior to completion of the education under~~
23 ~~paragraph (2) of this subsection, successful completion of~~
24 ~~50 hours of instruction in the following areas:~~

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

26 ~~(B) the anatomical basis of pain mechanisms,~~

1 ~~chronic pain, and referred pain;~~

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

3 ~~(D) universal precautions.~~

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

6 ~~(3) Successful completion of at least 54 practicum~~
7 ~~hours in dry needling course work approved by the~~
8 ~~Federation of State Boards of Physical Therapy or its~~
9 ~~successor (or substantial equivalent), as determined by~~
10 ~~the Department. Each instructional course shall specify~~
11 ~~what anatomical regions are included in the instruction~~
12 ~~and describe whether the course offers introductory or~~
13 ~~advanced instruction in dry needling. Each instruction~~
14 ~~course shall include the following areas:~~

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

16 ~~(B) dry needling indications and~~
17 ~~contraindications;~~

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

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

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

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

23 ~~Postgraduate classes qualifying for completion of the~~
24 ~~mandated 54 hours of dry needling shall be in one or more~~
25 ~~modules, with the initial module being no fewer than 27~~
26 ~~hours, and therapists shall complete at least 54 hours in~~

1 ~~no more than 12 months.~~

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

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

7 ~~Each licensee is responsible for maintaining records of~~
8 ~~the completion of the requirements of this subsection (b) and~~
9 ~~shall be prepared to produce such records upon request by the~~
10 ~~Department.~~

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

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

19 (e) (Blank). ~~A physical therapist shall not advertise,~~
20 ~~describe to patients or the public, or otherwise represent~~
21 ~~that dry needling is acupuncture, nor shall he or she~~
22 ~~represent that he or she practices acupuncture unless~~
23 ~~separately licensed under the Acupuncture Practice Act.~~

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