

STATE OF NEVADA

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Licensing Coordinator

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Board Operations Support Specialist

DEBORAH DIETER, PT
Board Investigator/Clinical Advisor

CHAD BIBLE, PT
Board Inspector

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BOARD MEETING MINUTES

July 10, 2026

Item 1. Call to Order, Confirmation of Quorum

Chair Laymon called the meeting to order at 9:00 a.m. A roll call was conducted to ensure a quorum was present.

Board Members Present:

Michael Laymon, PT, Board Chair
Gina McDade, PTA, Vice-Chair
Louis Hillegass, PT, Member
Anita Wagner, Secretary-Treasurer / Public Member
Joseph Indrieri, PT, Member

Members Absent: None

Board Counsel Present:

Joseph Ostunio, Deputy Attorney General

Board Staff Present:

Charles Harvey, Executive Director
Deanna Irby, Board Operations Support
Jennifer De Rose, Licensing Coordinator
Deborah Dieter, PT, Board Investigator/Clinical Advisor

Item 2. Board Mission *(Informational Only)*.

Chair Laymon read the Board's Mission Statement.

Item 3. Public Comment *(Informational Only)*.

Keith Lamping, PT, Clinical Director for Shelly Hawkins Physical Therapy, provided public comment in support of applicant Derrick Smith. Mr. Lamping stated that Mr. Smith previously worked for him as a technician before attending physical therapy school and described him as an exceptional young man and a very good person. Mr. Lamping recommended Mr. Smith for licensure without restrictions.

Item 4. Presentation on Safety Concerns and Considerations in Pelvic Physical Therapy Practice. *(Informational Only)*.

Roberta Stergar, DPT, Women's Health and Pelvic Physical Therapy Specialist, provided a presentation regarding safety concerns and considerations in pelvic physical therapy practice. Dr. Stergar emphasized the importance of training beyond entry-level education, including continuing education and lab-based coursework for practitioners performing internal or external pelvic floor assessments. She stated that adequate training, verified coursework, and professional competence are important to maintaining safe practice and establishing a consistent standard of care.

Dr. Stergar also stated that pelvic health practice presents unique safety considerations because of the intimate nature of the treatment and potential practitioner liability. She expressed concern that mandatory restrictions or certification requirements could limit patient access to care, particularly in underserved areas, and noted that she was not aware of any states that impose specific practice restrictions on pelvic physical therapy.

In response to questions from Board members, Dr. Stergar stated that certification or coursework may help protect practitioners, but that Board-imposed restrictions could reduce access to treatment. She also discussed the use of chaperones, noting that they are recommended in some settings but are not universally required and that patients often decline them. She stated that the Board's best role is to remain aware of the issue without creating rules that would unduly restrict practice.

The Board thanked Dr. Stergar for her comments. No Board action was taken.

Item 5. Board Member/Committee Reports and Updates *(For Possible Action)*.

A. Nevada Physical Therapy Association (APTA NV)

Susan Priestman, PT, current Legislative Chair and past President of APTA Nevada, presented the association's legislative priorities for the 2027 session. She stated that early collaboration, transparency, and feedback are essential to advancing legislative efforts. She reported that

APTA Nevada's priorities are intended to elevate the value of physical therapy in Nevada, strengthen the profession, improve patient care, and modernize the regulatory framework.

Ms. Priestman stated that she serves on a Practice Act committee composed of PTs, PTAs, Board members, and association representatives, and explained that the committee is working on future-focused modernization of practice acts. She identified term protection for "DPT" and "physiotherapy" as a priority, noting that misuse of those terms can create confusion and potential public harm. She also described ongoing efforts to elevate the role of the physical therapist assistant, improve Medicaid payment, and explore legislation expanding direct access authority for workers' compensation patients.

Board members discussed the relationship between legislative modernization and existing practice act reform. Members stated that some of the issues raised by APTA Nevada are already being addressed through the Board's practice act modernization efforts, including DPT protection and direct access-related issues. Members also discussed diagnosis as an issue affecting the profession's recognition and noted that expanding the scope of practice could include a more modern diagnosis framework.

Ms. Priestman agreed that diagnosis and modernization of the scope of physical therapy are essential topics for the next legislative session. She stated that the association supports moving toward an etiology-based model and that APTA Nevada is willing to work with the Board on practice act changes. She also noted that imaging and point-of-care ultrasound are included in the Model Practice Act language and should be considered as part of modernization efforts.

The Board thanked Ms. Priestman for the report and for the ongoing collaboration between the Board and APTA Nevada.

B. Government Relations (Tri-Strategies)

Paul Klein provided a government relations update and stated that his detailed report was included in the Board packet. He reported that ongoing work continues regarding Business and Industry regulations affecting licensing boards, as well as educational requirements for PTs and PTAs who wish to work in public schools.

Mr. Klein noted that the Division of Insurance will hold a public workshop at the end of the month regarding proposed fee increases for insurers based on gross billings. He stated that the proposed increase

could affect access to care and other workforce-related enforcement issues.

Mr. Klein also advised the Board that the State is in an election cycle, with all Assembly seats and Senate Districts 8, 9, 12, and 20 up for election on November 3, 2026, which could result in significant changes to the composition of the Legislature.

Mr. Klein further commented on Susan Priestman's presentation and stated that he would conduct additional research regarding the modernization of physical therapists' ability to diagnose and would report back to the Board. He advised that legislative activity would likely increase as interim committees begin meeting later in the year and that he would have more to report at that time.

No Board action was taken on this item.

C. Advisory Committee on Continuing Competency (ACCC)

Vice Chair McDade reported that the committee's course review process is functioning well and that no changes have been made to the approval process itself. She advised that the committee made two updates to its White Paper. First, the committee clarified that a licensee who researches and prepares a poster presentation may be eligible for continuing education credit, but a person who only observes poster presentations at a conference is not eligible for credit. Second, the committee added disclaimer language stating that course accreditation does not necessarily imply that the Nevada Physical Therapy Board supports the views of the course presenter or sponsor.

Vice Chair McDade explained that the disclaimer was added to address questions and concerns related to course applications and to clarify that Board approval of a course does not indicate endorsement of the content. No Board action was taken on this item.

D. NVPTB Model Practice Act (MPA) Workgroup

No report.

E. NVPTB Legal Counsel

Deputy Attorney General Ostunio reported that there was no additional legal counsel update beyond the status of pending disciplinary settlement matters. He stated that the Board was continuing to work through settlements and that a new date for those matters was still pending. He advised that he had followed up with counsel during the

week and would keep the Board informed once a new date was confirmed.

No Board action was taken on this item.

Item 6. Application Review *(For Possible Action).*

- A. Review the application of Derrick Smith for approval, denial, or other administrative action pursuant to NRS 640.160(2)(a).

The Board reviewed the application of Derrick Smith for approval, denial, or other administrative action pursuant to NRS 640.160(2)(a). Mr. Smith appeared via videoconference and thanked the Board for the opportunity to appear. Member Hillegass disclosed for the record that he knew Mr. Smith through his employment and had previously interviewed him in that capacity. Vice Chair McDade stated that she had reviewed the application thoroughly and had no questions.

Motion: Motion to approve Derrick Smith for licensure as a physical therapist without supervision; Member Indrieri.

Second: Chair Laymon

Motion passed.

Item 7. Board Disciplinary Matters *(For Possible Action).*

- A. Recommendation for approval of Stipulated Settlement Agreement
iv. Case No. 2025-113 **(Item Taken Out of Order)**
a) Licensee: Samuel Moore, PT, License No. 3139

Deputy Attorney General Ostunio presented the proposed settlement agreement on behalf of the Attorney General's Office. The matter involved allegations of 27 instances of untimely documentation, three missing discharge summaries, falsified records involving the signing of another clinician's name during a documentation backlog, and dry needling performed without Board certification.

The proposed resolution included one year of probation, a total of \$4,000 in fines and administrative costs, and four hours of continuing competence education addressing ethics, documentation, and billing.

Member McDade, who served as the Investigative Board Member on this matter, stated that she had discussed the case with the investigative team and agreed with the recommended resolution. Attorney Russ Marsh, counsel for the licensee, stated that Mr. Moore had been cooperative

throughout the investigation, had learned from the matter, and had agreed to the Board's offer.

Motion: Motion to approve the stipulated settlement agreement in Case No. 2025-113 and authorize the appropriate Board representative to execute the agreement and Board staff to take all necessary actions to implement its terms; Chair Laymon.

Second: Member Hillegass

Abstain: Vice-Chair McDade

Motion Passed.

i. Case 2025-105

- a) Licensee: Kim Miranda Barenchi, PTA, License No. A-0665
- b) Licensee: Karen Crawford, PT, License No. 0675
- c) Licensee: Monica Kuether, PT, License No. 5181

The Board discussed a group of related disciplinary matters involving three licensees from the same practice setting. Deputy Attorney General Ostunio explained that the allegations involved improper supervision and delegation, approval of billing sheets for services performed by unlicensed physical therapy technicians, use of skilled service billing codes for technician-provided services, and multiple overbilling incidents.

The proposed settlement terms were the same for each licensee. Each agreement called for one year of probation, a \$3,000 administrative fine, \$2,000 in administrative costs, and eight hours of continuing competence education, including four hours in documentation and billing and four hours in supervision and delegation.

During the discussion, Board members expressed concern about the repeated nature of billing and supervision violations and whether the Board could do more to prevent recurrence through education, audit, or probation monitoring. Members noted that the continuing competency review process evaluates course summaries and outcomes, but not full course content, which limits the Board's ability to require specific instruction in billing or supervision topics. The Board also discussed whether future settlement agreements should require executive director's approval of continuing education and whether an audit could be conducted during the probationary period.

The Investigative Board Member and investigative staff explained that the matter involved more than isolated overbilling. They stated that the investigation found improper delegation by both PTs and PTAs to technicians, improper skilled intervention billing, and a broader pattern of practice concerns that were uncovered by expanding the review beyond the initial complaint. Board members also discussed how overbilling is assessed, including whether billed timed units are reasonably aligned with documented hours of service and whether the documentation supports the billing submitted.

Executive Director Harvey stated that the Board's disciplinary process had become more comprehensive by incorporating additional board member reviews of proposed settlement agreements. He explained that the fine amounts and proposed settlement terms are developed through an internal review process with input from the investigator and attorney, and that the amount may change during negotiation depending on the facts of the case and how the matter may best be resolved. He stated that the expanded process gives investigative board members additional tools, including the ability to recommend follow-up inspections and require licensees to provide periodic submissions for review.

Executive Director Harvey acknowledged that these measures create additional workload and tracking responsibilities for staff but stated that they also provide the Board with stronger compliance tools. He noted that it can be difficult to tailor continuing education requirements to a particular course when the Board does not have full access to the course content, but that repeated violations would be handled differently as repeat offenses. He concluded by stating that the Board would develop greater consistency over time in how it applies fines, standards, and disciplinary expectations.

The Board ultimately concluded that the proposed settlements reflected the seriousness of the conduct and that the fines and probation terms were appropriate.

Motion: Motion to approve the proposed settlement agreements in Case No. 2025-105 and authorize the appropriate Board representative to execute the

agreements and Board staff to take all necessary actions to implement the terms; Chair Laymon.

Second: Vice-Chair McDade

Abstain: Member Hillegass

Motion Passes.

ii. Case 2025-100

a) Licensee: Aaron Sharp, PT, License No. 6575

The Board considered a proposed settlement agreement involving Aaron Sharp, PT. Deputy Attorney General Ostunio alleged that the licensee deviated from the physician's prescription and plan of care, progressed postoperative treatment too quickly, and caused harm to the surgical repair, resulting in the patient requiring an additional surgery.

Motion: Motion to approve the proposed settlement agreement as presented and to authorize the appropriate Board representative to execute the agreement and Board staff to take all necessary actions to implement its terms; Chair Laymon

Second: Vice Chair McDade

Abstain: Member Hillegass

Motion Passes.

i. Case 2025-92

a) Licensee: Carlos Galang, PTA, License No. A-0775

The Board considered a proposed settlement agreement involving Carlos Galang, PTA. Members expressed concern that the proposed settlement agreement did not adequately reflect the seriousness of the alleged conduct, and a motion was made to deny the proposed settlement agreement and return the matter for further review.

Motion: Motion to deny the proposed settlement agreement and to return the matter for further review; Chair Laymon

Second: Member Wagner.

Motion passes.

Item 8. Consent Agenda Items *(For Possible Action).*

A. Board Operations Report

B. Draft Board Meeting Minutes (March 6, 2026)

C. Ratification of PT/PTA Licenses Approved (March – April 2026)

D. Ratification of Advisory Committee on Continuing Competence (ACCC)
Recommendations for Courses Reviewed (April 10, 2026)

The Board considered the consent agenda, which included the Board Operations Report, the draft March 6, 2026, Board Meeting Minutes, ratification of PT/PTA licenses approved between March and April 2026, and ratification of ACCC recommendations for courses reviewed on April 10, 2026.

Executive Director Harvey presented the Board Operations Report as an end-of-fiscal-year summary. He reported the following highlights:

- 3,892 active licensees as of June 1, 2026, including 2,780 PTs and 990 PTAs.
- 424 new licenses were issued in FY2026.
- 116 PT compact privileges issued.
- 319 military veterans or veteran spouses currently licensed in Nevada.
- Application processing time reduced to one day.
- Bulk renewal season began on May 1 and runs through July 31, with approximately 70 percent of licenses renewed during that period.
- The ACCC reviewed approximately 1,238 courses in FY2026.
- 28 complaints were received, 24 investigations were completed, 10 disciplinary actions were carried out, and 26 cases were closed.
- Board financials remained on track as the fiscal year closed.

During the discussion, Member Wagner asked about board training records referenced in the operations report. Executive Director Harvey explained that board members are responsible for maintaining their own training records and suggested that members provide those records to staff by email so the Board can track them centrally. Member Wagner also asked about the upcoming Leadership Forum, and Board members discussed questions she could ask about effective board functioning, regulatory structure, case review methods, use of advisory groups, and disciplinary standards across other boards.

The Board also discussed the terms of members whose appointments expire in October 2026. Executive Director Harvey stated that requests for reappointment had been submitted to the Governor's Office. Members confirmed their interest in being reappointed and discussed the fact that they would remain on the Board until new appointments or reappointments are made.

Motion: Motion to approve the consent agenda as presented;
Member Wagner.
Second: Member Hillegass
Motion Passes.

Item 9. Board General Discussion & Action Items *(For Possible Action).*

A. Practicing Physical Therapy with an Expired or Lapsed License

Executive Director Harvey raised the issue of individuals who continue practicing after their licenses have expired and proposed a tiered approach for addressing late renewals. He explained that the Board's licensing system sends multiple renewal reminders, but the obligation remains on the licensee to maintain an active license and avoid practicing while expired.

Board members discussed different scenarios, including licensees who were not practicing, those who practiced for less than 30 days after expiration, and those who practiced beyond 30 days. Members noted that practicing on an expired license is a serious issue, that late renewal is not the same as a grace period, and that licensees should know when their licenses expire. The Board also discussed whether an administrative letter, late fee, or disciplinary action was appropriate for short-term expired practice, and whether repeat or longer-term expired practice should be treated more seriously.

The Board further discussed whether additional work was needed to modernize the practice act and clarify the consequences of practicing on an expired license. Members agreed that the issue should be studied further and that a small work group should develop recommendations for Board consideration. Executive Director Harvey stated that he would follow up on the recommendation and bring back proposed options for further discussion.

B. Nevada Healthcare Workforce Survey

Executive Director Harvey provided an update on the Healthcare Workforce Survey and explained that the survey had been distributed to licensees as part of a collaborative healthcare workforce working group effort. He stated that the survey was intended to collect workforce data for use by legislators and rule makers, although it did not capture all of the information the Board would ideally want from a physical therapy perspective.

Executive Director Harvey also identified the other participating organizations represented on the workforce working group, including

social workers, the Board of Nursing, the Board of Osteopathic Medicine, the medical examiners, the Dental Board, the Board of Pharmacy, the Board of Psychological Examiners, marriage and family therapy, UNLV School of Public Health, the Division of Child and Family Services, Public and Behavioral Health, and the Nevada Primary Care Association. He reported that approximately 200 PTs and PTAs have already responded to the survey and that he expected to provide actual data at the next meeting.

Board members asked how long the survey would remain open, and Executive Director Harvey stated that it would remain available until July 15. He also noted that workforce surveys like this may become mandatory in the future in connection with license renewal, as some other jurisdictions have used renewal-linked surveys.

C. Discussion Regarding Board Vision, Priorities, and Future Initiatives

The Board discussed the purpose of its service and the priorities that originally led each member to join the Board. Vice-Chair McDade stated that she joined because of concern about the misuse of technicians in Nevada and the effect that improper use has on patient care and on the role of the physical therapist assistant. She also identified expansion of practice availability for PTAs, including in animal therapy, as one of her ongoing goals. She emphasized the importance of the strategic plan and the need to keep the Board's momentum focused on the issues that matter most.

Board members then shared their individual priorities and motivations. Chair Laymon stated that a primary concern is protecting the Board from being combined with other boards and losing its independent identity. He also stated that modernizing the practice act should include clearer language on physical therapy diagnosis, direct access, imaging, and physician-level recognition of the profession. Member Indrieri stated that the ability to diagnose and operate at the top of the profession should be more clearly recognized in the statute to reduce resistance to scope expansion.

Member Wagner stated that her interest in serving came from personal experience with therapy through her child and a desire to better understand the profession from the public perspective. She emphasized the importance of accountability, licensure, and having a public member's viewpoint represented on the Board.

Executive Director Harvey noted that the Board should periodically revisit priorities to ensure members are still working toward the goals

they set when they joined. Member McDade agreed that the upcoming legislative session and the crosswalk process make this an important time to clarify the Board's priorities and to identify the right people to help draft future statutory language.

Members Hillegass and others added that their goals include term protection, expanded jurisdiction over non-licensees, recognition of the profession's diagnostic role, defining the appropriate use of technicians, and addressing pressures that affect practice viability. Members also discussed the importance of reimbursement reform, autonomy, and protecting the profession from misuse or overreach by other providers or ancillary services.

The discussion concluded with general agreement that the Board's strategic plan and legislative agenda remain aligned with the priorities discussed, and that the Board should continue to revisit these goals as work progresses.

D. Review, Discussion, and Potential Modification of the Board's Audit Frequency

Executive Director Harvey explained that in November 2025, the Board had approved moving to a biennial audit, with the belief that the Board's current contract covered the FY26 audit period. Staff later determined that the existing auditor contract would not fully cover the current audit period. This matter was brought back to the Board for consideration of beginning the biennial audit cycle immediately, which would avoid the need for a new contract at this time.

Member McDade stated that the proposal made sense and noted that requiring a hurried audit could create scheduling and procurement problems. She explained that the Board might otherwise need to reopen the contracting process and solicit bids from other firms, which would be time-consuming and impractical at this stage of the fiscal year.

Executive Director Harvey confirmed that if the Board approved the change, staff would begin contract discussions for the 2027 audit period.

Motion: Motion to adopt the audit frequency change effective immediately, as previously discussed; Member Wagner.

Second: Vice-Chair McDade.

Motion Passes.

After approval, Executive Director Harvey stated that he would inform the Legislative Counsel Bureau that the Board had approved the

transition to biennial audits and would begin reviewing proposals for a vendor to conduct the Board's future biennial financial audits.

E. Open Roundtable

Vice-Chair McDade stated that she would take the initiative to begin putting together a new committee for language review. She explained that the committee would likely meet as the Board continues the Model Practice Act Crosswalk review process to ensure that each group's priorities are clearly identified and brought back to the Board for review. She added that if there are specific considerations related to specialty practice, a new committee would allow for additional perspectives so that all relevant issues are included in the language review process.

Executive Director Harvey stated that the timing was appropriate because many of the issues discussed were being addressed by the Model Practice Act Workgroup and would be incorporated into upcoming practice act language. He noted that the Board will need to have its legislative committee meet with Tri-Strategies to discuss bill draft requests and administrative rulemaking priorities arising from the work group. He also stated that he had compiled comments from the large tracking document into a single document containing the current priorities and recommendations, and that he had embedded the NRS changes so the proposed strikeouts and revisions would be easier to review at the next meeting. Member McDade thanked Executive Director Harvey and noted that some additional comments would need to be added for consideration in the language review process.

Item 10. Report from Board Chair and Members *(Informational Only)*.

None.

Item 11. Future Agenda Items *(Informational Only)*.

- Model Practice Act Workgroup Update
- Practicing Physical Therapy with an Expired or Lapsed License

Item 12. Public Comment

None.

Item 13. Adjournment

Chair Laymon adjourned the meeting at 11:45 a.m.