

ARKANSAS
STATE BOARD OF HEALTH

**RULES AND REGULATIONS
FOR ORTHOTIC, PROSTHETIC,
AND PEDORTHIC PROVIDERS
IN ARKANSAS**



Promulgated Under the Authority of Act 174 of 2007, as Amended
Revision effective date: **March 1, 2016**

ARKANSAS DEPARTMENT OF HEALTH
HEALTH FACILITIES

NATHANIEL SMITH, MD, MPH DIRECTOR
AND STATE HEALTH OFFICER

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SECTION 1: Authority

These Rules are promulgated under the authority of the Arkansas Orthotics, Prosthetics and Pedorthics Practice Act of 2007, Ark. Code Ann. § 17-107-101 et seq., as amended.

SECTION 2: Purpose

In addition to the purposes provided by the Act, these Rules are promulgated to protect the health and safety of individuals receiving orthotic, prosthetic, or pedorthic services in Arkansas.

SECTION 3: Definitions

- 1) **Act** means the Arkansas Orthotics, Prosthetics and Pedorthics Practice Act of 2007, as may be amended, and codified at Ark. Code Ann. § 17-107-101 et seq.
- 2) **Advisory Board** or **board** means the Arkansas Orthotics, Prosthetics and Pedorthics Advisory Board.
- 3) **Board for Certification in Pedorthics** has merged and is now known as the American Board for Certification in Orthotics, Prosthetics, and Pedorthics, Inc
- 4) **Board of Health** means the Arkansas State Board of Health.
- 5) **Department** means the Arkansas Department of Health.
- 6) **Custom Fabricated and Fitted Devices.**
 - a. Custom fabricated and fitted device means an orthosis, prosthesis, or pedorthic device which is fabricated to original measurements or a mold for use by a patient in accordance with a prescription from a health care practitioner authorized by law to write such prescriptions and which requires substantial clinical and technical judgment in its design and fitting.
 - b. Custom fitted device means a prefabricated orthosis, prosthesis, or pedorthic device sized or modified for use by the patient in accordance with a prescription from a health care practitioner authorized by law to write such prescriptions and which requires substantial clinical judgment and substantive alteration for appropriate use.
 - c. Custom fabricated devices and custom fabricated and fitted devices must be dispensed by a licensed health care practitioner or by a person licensed under these rules in accordance with a prescription from a licensed health care practitioner.
- 7) **Off-the-shelf device** means a prefabricated prosthesis or orthosis sized or modified for use by the patient in accordance with a prescription from a health care practitioner authorized by law to write such prescriptions and which does not require substantial clinical judgment and substantive alteration for appropriate use.
 - a. The sale of over-the-counter and off-the-shelf devices by non-licensed persons is not prohibited by these rules.
- 8) **Orthosis** means an external device that is:
 - a. Intended to restore physiological function or cosmesis to a patient; and

- b. Custom-designed, fabricated, assembled, fitted, or adjusted for the patient using the device prior to or concurrent with the delivery of the device to the patient.
 - c. Orthosis does not include a cane, crutch, corset, dental appliance, elastic hose, elastic support, fabric support, generic arch support, low-temperature plastic splint, soft cervical collar, truss, or other similar device that:
 - i. Is carried in stock and sold without therapeutic modification by a corset shop, department store, drug store, surgical supply facility, or similar retail entity; and
 - ii. Has no significant impact on the neuromuscular, musculoskeletal, or neuromusculoskeletal functions of the body.
- 9) **Orthotics** means the science and practice of providing or managing the provision of an orthosis based on clinical assessment, technical judgment, and an order from a health care practitioner authorized by law to write an order for an orthosis.
10. **Orthotic assistant** means an individual who is licensed under this chapter to assist an orthotist or an orthotist/prosthetist with patient care services and fabrication of orthoses or pedorthic devices under the supervision of an orthotist or an orthotist/prosthetist.
- 11) **Orthotic education program** means a course of instruction in orthotics:
 - a. Accredited by the Commission on Accreditation of Allied Health Education Programs; and
 - b. Approved by the Advisory Board.
- 12) **Orthotic resident** means an individual who has completed an orthotic education program and is continuing his or her clinical education in an orthotic residency program:
 - a. Accredited by the National Commission on Orthotic and Prosthetic Education; and
 - b. Approved by the Advisory Board.
- 13) **Orthotic/prosthetic assistant** means an individual who is licensed under this chapter to assist both an orthotist and a prosthetist with patient care services and fabrication of prostheses, orthoses, or pedorthic devices under the supervision of an orthotist, an orthotist/prosthetist, or a prosthetist as appropriate.
- 14) **Orthotist** means an individual who is licensed under this chapter to practice orthotics and pedorthics.

- 15) **Orthotist/prosthetist** means an individual who is licensed to practice orthotics, pedorthics, and prosthetics.
- 16) **Over-the-Counter** means a prefabricated, mass-produced device that is prepackaged and requires no professional advice or judgment in either size selection or use, including fabric or elastic supports, corsets, generic arch supports and elastic hoses.
- 17) **Pedorthic device** means therapeutic footwear, foot orthoses for use at the ankle or below, or footwear modified for therapeutic purposes as ordered by a licensed health care practitioner authorized by law to write an order for a pedorthic device. “Pedorthic device” does not include:
 - a. Nontherapeutic accommodative inlays or nontherapeutic accommodative footwear regardless of method of manufacture;
 - b. Shoes modified or made for nontherapeutic purposes;
 - c. Unmodified shoes; or
 - d. Prefabricated foot care products;.
- 18.) **Pedorthic education program** means a course of instruction in pedorthics:
 - a. Accredited by the American Board for Certification in Orthotics, Prosthetics, and Pedorthics, Inc.; and
 - b. Approved by the Advisory Board.
- 19) **Pedorthics** means the science and practice of providing or managing the provision of a pedorthic device based on clinical assessment, technical judgment, and an order from a health care practitioner authorized by law to write an order for a pedorthic device;
- 20) **Pedorthist** means an individual who is licensed under this chapter to practice pedorthics.
- 21) **Prefabricated device** means a mass-produced device that:
 - a. Is prepackaged, carried in stock, and sold off the shelf or over the counter by a corset shop, department store, drug store, surgical supply facility, or similar retail entity; and
 - b. Does not require clinical assessment, technical judgment, or therapeutic modification for appropriate use by the customer.
 - c. “Prefabricated device” may include a cane, a crutch, a corset, an elastic hose, an elastic support, a fabric support, a generic arch support, a low-temperature plastic splint, a soft cervical collar, a truss, or other similar device.

- 22) **Prosthesis** means an external device that is:
- a. Intended to replace an absent external body part for the purpose of restoring physiological function or cosmesis to a patient; and
 - b. Custom-designed, fabricated, assembled, fitted, or adjusted for the patient using the device prior to or concurrent with being delivered to the patient.
 - c. “Prosthesis” does not include an artificial eye, an artificial ear, a dental appliance, a cosmetic device, such as artificial eyelashes or wigs, an artificial facial device, or other device that does not have a significant impact on the neuromuscular, musculoskeletal, or neuromusculoskeletal functions of the body.
- 23) **Prosthetic assistant** means an individual who is licensed under this chapter to assist a prosthetist or orthotist/prosthetist with patient care services and fabrication of prostheses under the supervision of a prosthetist or an orthotist/prosthetist.
- 24) **Prosthetic education program** means a course of instruction in prosthetics:
- a. Accredited by the Commission on Accreditation of Allied Health Education Programs; and
 - b. Approved by the Advisory Board.
- 25) **Prosthetic resident** means an individual who has completed a prosthetic education program and is continuing his or her clinical education in a prosthetic residency program:
- a. Accredited by the National Commission on Orthotic and Prosthetic Education; and
 - b. Approved by the Advisory Board.
- 26) **Prosthetics** means the science and practice of providing or managing the provision of a prosthesis based on clinical assessment, technical judgment, and an order from a health care practitioner authorized to write an order for a prosthesis.
- 27) **Prosthetist** means an individual who is licensed under this chapter to practice prosthetics.
- 28) **Therapeutic Footwear.** The following actions with respect to therapeutic footwear and medical devices for the foot and ankle must be performed by a licensed health care practitioner who is acting within his or her lawful scope of practice:
- a. Modifications or additions to the interior or exterior of footwear for therapeutic purposes, including but not limited to heel lifts, outflare heels, Thomas heels, full

sole lifts, wedged soles, rocker bottom soles, metatarsal bars, metatarsal raises or inserts that have fillers as part of their construction, toe fillers, and partial foot fillers;

- b. Permanent or temporary attachment of an orthosis to the footwear;
- c. Addition or modification of a removable or attached therapeutic foot device inside the shoe which was fabricated based on a cast, impression, mold, scan, imprint or tracing;
- d. Creation of an image of a person's foot or ankle through the use of a mold, cast, scanning device, digital appliance, tracing, pressure sensitive device or other similar device; and
- e. Analysis, evaluation, measurement, assessment, or screening of a foot for the purpose of making a therapeutic recommendation.

SECTION 4: Restrictions on the Practice of Orthotists, Prosthetists and Pedorthists

- 1) A licensed orthotist, prosthetist or pedorthist may provide care or services only if the care or services are provided pursuant to an order from a licensed health care practitioner authorized to issue such an order.
- 2) A licensed orthotist, prosthetist, or pedorthist must provide services from a facility which has appropriate clinical and laboratory space and equipment to allow that licensee to provide orthotic, prosthetic, or pedorthic care.
- 3) The scope of practice of a licensed orthotist, prosthetist, or pedorthist does not include the right to diagnose a medical problem or condition or the right to give medical advice as to the nature, cause, or treatment for the problem or condition for which the orthosis, prosthesis, or pedorthic device is being dispensed. However, the scope of practice of a licensed orthotist, prosthetist, or pedorthist does include the right to provide information or demonstration or training, regarding the proper use and care of the device and to make adjustments to the device as needed.
- 4) Assistant orthotist/prosthetist must practice within a one (1) hour radius of the supervising practitioner.
- 5) A licensed orthotist, prosthetist, or pedorthist may utilize one or more non-licensed persons to assist in the provision of services, but the non-licensed person shall be limited to the performance of minor repairs on devices which have been previously dispensed to a patient.

SECTION 5: Necessity of Licensure

Upon promulgation of these Rules, no person shall practice orthotics, prosthetics, or pedorthics in Arkansas, or hold himself or herself out as being able to practice such professions, or dispense an orthosis, prosthesis, or pedorthic device, unless such person is licensed in Arkansas.

SECTION 6: Qualifications for Licensure

- 1) Orthotist – To qualify for a license to practice orthotics, a person shall:
 - a. Complete an orthotics education program which is accredited by the Commission on Accreditation of Allied Health Education Programs or its successor organization;
 - b. Possess a baccalaureate degree or have successfully completed the number of semester hours equivalent to four (4) years of study at a four-year college or university;
 - c. Successfully complete a clinical NCOPE residency in orthotics; and
 - d. Successfully complete one of the following national certification examinations:
 1. American Board for Certification in Orthotics, Prosthetics, and Pedorthics, Inc. (“ABCOPP”);
 2. Board of Certification/Accreditation (“BOC”); or
 3. equivalent as -determined by the Advisory Board.

- 2) Prosthetist – To qualify for a license to practice prosthetics, a person shall:
 - a. Complete a prosthetics education program which is accredited by the Commission on Accreditation of Allied Health Education Programs or its successor organization;
 - b. Possess a baccalaureate degree or have successfully completed the number of semester hours equivalent to four (4) years of study at a four-year college or university;
 - c. Successfully complete a clinical NCOPE residency in prosthetics; and
 - d. Successfully complete one of the following national certification examinations:
 1. ABCOPP;
 2. BOC; or
 3. equivalent as determined by the Advisory Board.

- 3) Pedorthist – To qualify for a license to practice pedorthics a person shall:
 - a. Possess a high school diploma or GED;

- b. Possess the Certified Pedorthist credential from either ABCOPP or BOC; and
 - c. Successfully complete one of the following national certification examinations:
 - 1. ABCOPP;
 - 2. BOC; or
 - 3. equivalent as determined by the Advisory Board.
- 4) Assistant – An applicant for certification to practice as an orthotic assistant, prosthetic assistant, or orthotic/prosthetic assistant shall submit to the written evidence, verified by oath, that the applicant
- a. Possesses a high school diploma or GED;
 - b. Has a minimum of three (3) years of experience in the field in which the person is seeking licensure as an assistant; and
 - c. Has written documentation from a licensed prosthetist or a licensed orthotist that the applicant is qualified to perform as an assistant in the field in which the person is seeking licensure as the assistant.

SECTION 7: Procedures for Licensure

- 1) An applicant shall obtain a current application packet from the Advisory Board, respond truthfully and completely to every question or request for information contained in the application form, and submit it, along with all documents and fees required, to the Department. It is the intent of this Rule that all steps necessary to accomplish the filing of the required documentation be completed prior to filing an application and that all materials be filed simultaneously.
- 2) An applicant shall complete the application with the supporting documentation proscribed to the Arkansas Department of Health.
- 3) An applicant shall disclose the circumstances surrounding any of the following:
 - a. Conviction of a crime in any country, state, or municipality, except minor traffic violations;
 - b. The denial of certification or licensure application by any other state or country, or the discipline of the certificate holder or licensee in any state or country;
 - c. Loss, restriction, or voluntary surrender of certification or licensure privileges; and
 - d. Any judgment or settlement in a civil suit in which the applicant was a party defendant, including malpractice, unethical conduct, breach of contract, or any other civil action remedy recognized by the country's or state's statutory, common law, or case law.
- 4) When necessary, all required documents shall be translated into English and such translation, together with the original document, shall be certified as to authenticity by the issuing source. Both versions must be submitted simultaneously.
- 5) Application review, approval, denial, and interview decisions shall be made by the Advisory Board.
- 6) The requirement for licensure under these Rules shall not apply to:

A person who is an employee of any bureau, division, or agency of the federal government while in the discharge of the employee's official duties;

 - a. A student enrolled in an educational program at a college or university which will enable that student to obtain a license to practice orthotics, prosthetics, or pedorthics upon graduation from the program;
 - b. A resident continuing such resident's clinical education in a residency accredited by the National Commission on Orthotic and Prosthetic Education; and
 - c. A student in a qualified work experience program or internship in pedorthics.
- 7) Licensee shall notify the Advisory Board within thirty (30) days of any:
 - a. Extension of the discipline of practice,
 - b. Name and address changes.

SECTION 8: Fees

- 1) License fee for initial licensure and renewal of licensure for the practice of orthotics, prosthetics, or pedorthics, shall be three hundred dollars (\$300) every two (2) years.
- 2) License fee for initial licensure and renewal of licensure as an orthotic assistant, an orthotic/prosthetic assistant or a prosthetic assistant shall be one hundred dollars (\$100.00) every two (2) years.
- 3) Late Renewal \$100.00.
- 4) Reinstatement \$300.00.
- 5) Reinstatement for Assistant \$100.00.
- 6) All fees are non-refundable.

SECTION 9: Renewal of Licensure

- 1) Licenses are valid through December 31st of the expiration year.
- 2) Renewal notifications will be sent by the Department Health Facility Services Section of the Arkansas Department of Health, to the last address on file with the Advisory Board. Failure to receive such notification does not relieve the licensee from the responsibility of meeting all requirements for renewal.
- 3) A license issued pursuant to these rules is renewable by the expiration date. To be eligible for renewal an individual must submit an application on or before the expiration date the following:
 - a. A completed renewal application form; and
 - b. The renewal fee as required.
- 4) To be eligible for renewal an individual must have completed the continuing education requirements and must attest to such completion on the renewal application. An individual who fails to obtain continuing education hours will be ineligible for renewal.
- 5) Any licensee who fails to renew his or her license as provided in this section may be reinstated by the board on payment of the renewal fee plus a late fee unless waived by the Board.
- 6) Reinstatement of a license that has expired as a result of failure to timely renew may be accomplished upon meeting the following conditions:
 - a. Payment of all past due renewal fees;
 - b. Payment of the late renewal fee; and
 - c. Compliance with continuing education requirements.

SECTION 10: Inactivation & Reactivation

- 1) Inactive status:
 - a. An individual licensed or certified under this chapter may place his or her license or certification on inactive status by notifying the Advisory Board in writing.
 - b. The holder of an inactive license or certification is excused from payment of renewal fees and shall not practice in his or her area of licensure or certification in this state.
- 2) A person who holds an active license may apply for inactive status in the following manner:
 - a. Obtain, complete, and submit to the Advisory Board an affidavit of retirement form; and
 - b. Submit any supporting documentation which may be required to the Advisory Board's administrative office.
- 3) A licensee whose certificate has been inactivated may re-enter active status by doing the following:
 - a. Submit an application and pay the renewal fee; and
 - b. Submit verification of successful completion of continuing education hours for the period of inactivity.
- 4) Any person who engages in practice while his or her license or certification is inactive shall be considered to be practicing without a license, which shall be grounds for discipline under § 17- 107-310.

SECTION 11: Suspension and Revocation and Disciplinary Action

Licenses are subject to denial, suspension, restriction and revocation as provided by the Act.
See Ark. Code Ann. § 17-107-310.

SECTION 12: Hearings

Individuals may appeal a disciplinary action within ten (10) calendar days of notice of the action. A request for appeal shall be made in writing to the Advisory Board. Mail or deliver notice to: OPP Advisory Board 5800 West 10th Street Suite 400 72204. Hearings will be conducted according to the Arkansas Administrative Act, Ark. Code Ann § 25-15-201 et seq.

SECTION 13: Advertising

Advertising shall not be false, fraudulent, deceptive, or misleading.

SECTION 14: Continuing Education

- 1) Required hours:
 - a. Orthotists and prosthetists must biennially complete thirty (30) hours of continuing education in courses applicable to his/ her profession. A person who is licensed in more than one (1) profession under these rules shall biennially complete forty (40) hours of continuing education in courses applicable to the professions in which he/she is licensed.
 - b. Pedorthotists must complete 22 hours biennially.
 - c. Assistants must complete 15 hours if employed in one discipline or 20 hours if employed in both, biennially.
 - d. At least six (6) hours of the continuing education each year shall be offered to licensees from providers in the state of Arkansas.
- 2) Acceptable continuing education shall consist of courses provided, approved, or sponsored by:
 - a. The American Board for Certification in Orthotics, Prosthetics and Pedorthics, Inc.;
 - b. The Board for Orthotist/Prosthetist Certification;
 - c. The Pedorthic Footwear Association;
 - d. Any other entity whose education programs have been approved by the Advisory Board.
- 3) Each licensee must maintain proof of attendance and completion of all continuing education requirements. This documentation must be retained for a period of four (4) years from the end of the calendar year in which the continuing education was required. This documentation must be produced for inspection and verification, if requested in writing by the Advisory Board during its verification process.
- 4) Each licensee must, within thirty (30) days of a request from the Advisory Board, provide evidence of continuing education activities. Certificates verifying the individual's attendance or documents from course providers are such evidence.
- 5) Violations: Any person who falsely attests to attendance and completion of the required hours of continuing education may be subject to disciplinary action.

SECTION 15: Severability

If any provision of these Rules and Regulations or the application thereof to any person or circumstances is held invalid, such invalidity shall not affect other provisions or applications of these Rules and Regulations which can give effect without the invalid provisions or applications and to this end the provision hereto are declared severable.

Addendum A: Code of Ethics

1) PREAMBLE. The purpose of a code of ethics is to acknowledge a professions acceptance of the responsibility and trust conferred upon it by society and to recognize the internal obligations inherent in that trust. The following paragraphs delineate the standards governing the conduct of Orthotic, Prosthetic and Pedorthic Providers in their professional interactions with patients, colleagues, other health professionals and the general public. Realizing that no code can encompass all ethical responsibilities of the Orthotic, Prosthetic and Pedorthic Providers, this enumeration of obligations in the code of ethics is not comprehensive and does not constitute a denial of the existence of other obligations, equally imperative, and not specifically mentioned herein. This code of ethics shall be binding on all Orthotic, Prosthetic and Pedorthic Providers in Arkansas.

a. CANON 1

Orthotic, Prosthetic and Pedorthic Providers must uphold the dignity and honor of the profession, accept its disciplines and expose without hesitation illegal, unethical and incompetent conduct.

INTERPRETIVE STATEMENTS

Orthotic, Prosthetic and Pedorthic Providers are part of a collaborative effort to deliver proper health care to the patient under the Orthotic, Prosthetic and Pedorthic Provider's care.

The Orthotic, Prosthetic and Pedorthic Provider has a personal, as well as a professional, obligation to protect and safeguard the patients from illegal and/or unethical actions or the incompetence of any person.

The Orthotic, Prosthetic and Pedorthic Provider must maintain personal integrity and establish the appropriate means to fully protect his freedom of conscience for the delivery of services to the patient.

The Orthotic, Prosthetic and Pedorthic Provider who demonstrates incompetence or illegal conduct as it pertains to the Code of Ethics shall be exposed to the proper authorities.

b. CANON 2

Orthotic, Prosthetic and Pedorthic Providers shall respect the patient's rights and dignity and shall uphold the doctrine of confidentiality regarding privileged patient information.

INTERPRETIVE STATEMENTS

Information about the patient's clinical situation will be kept confidential, unless otherwise required by law, in order to protect the welfare of an individual or community.

Written guidelines or protocols of an institution or department may be instrumental in deciding the manner in which confidential information is handled for release.

- c. **CANON 3**
Orthotic, Prosthetic and Pedorthic Providers shall provide only those services for which they are qualified. Orthotic, Prosthetic and Pedorthic Providers shall not misrepresent in any manner, either directly or indirectly, their skills, training, professional credentials, identity or services.

INTERPRETIVE STATEMENTS

Orthotic, Prosthetic and Pedorthic Providers will accept responsibility for the exercise of sound judgment in the delivery of services to the patient and shall be accountable for the quality of the service provided.

Orthotic, Prosthetic and Pedorthic Providers will provide accurate information about the profession, and services they provide, as well as the Orthotic, Prosthetic and Pedorthic Provider's own qualifications.

Orthotic, Prosthetic and Pedorthic Providers shall not engage in practices beyond their competence or training.

Orthotic, Prosthetic and Pedorthic Providers shall not delegate to a less qualified person any activity, which requires the unique skill, knowledge and judgment of a formally educated Orthotic, Prosthetic and Pedorthic Provider. Services rendered by supportive personnel will be under the supervision of a formally educated Orthotic, Prosthetic and Pedorthic Provider.

- d. **CANON 4**
Orthotic, Prosthetic and Pedorthic Providers shall strive to improve their medical knowledge and skills on a continuing basis.

INTERPRETIVE STATEMENTS

Orthotic, Prosthetic and Pedorthic Providers shall support quality didactic and clinical education.

Professional conduct will be maintained toward Orthotic, Prosthetic and Pedorthic Providers peers, students, medical staff and patients.

Orthotic, Prosthetic and Pedorthic Providers shall participate in educational activities, either by individual study or through continuing education, which will enhance their basic knowledge in order to continue to provide quality health care to the patient.

- e. **CANON 5**
Orthotic, Prosthetic and Pedorthic Providers shall maintain and promote high standards for their practice and include education, research and scientific presentations and/or publications.
- f. **CANON 6**

An Orthotic, Prosthetic and Pedorthic Provider shall at all times hold the well-being of the patient to be paramount and shall not act in such a way as to bring the member's interests into conflict with the patient's interests. An Orthotic, Prosthetic and Pedorthic Provider shall deliver health care services without regard to race, color, creed, national origin, sex, age, religion, sexual preference or physical and/or mental condition.

INTERPRETIVE STATEMENTS

Orthotic, Prosthetic and Pedorthic Provider's practice and adherence to ethical principles shall take preference over business practices. Orthotic, Prosthetic and Pedorthic Providers shall place service before material gain.

Orthotic, Prosthetic and Pedorthic Providers shall fully disclose to clientele other business practices that may appear as conflict of interest to clientele and/or public. These may include but are not limited to:

- 1) Consultant for fee.
 - 2) Clinical instructor (support staff for industry).
 - 3) Sales representative.
 - 4) Technical advisor.
 - 5) Lecture for fee.
 - 6) Acceptance of fees, gratuities, funding from industry.
- 2) To this end, the State Board of Health holds that each Orthotic, Prosthetic and Pedorthic Provider has the following ethical and professional responsibilities:
- a. The Orthotic, Prosthetic and Pedorthic Provider will always attempt to fairly evaluate all competing products and services, with the principal selection criteria being that of regard for patient safety and well-being.
 - b. The Orthotic, Prosthetic and Pedorthic Provider shall always base any decision on product and service selection on clinical evaluations and documented clinical and scientific data.

In conclusion, it is the responsibility of the Orthotic, Prosthetic and Pedorthic Provider to make decisions regarding the selection of clinical products with the patient as the primary concern.

CERTIFICATION

This will certify that the foregoing revisions to the Rules and Regulations for Orthotic, Prosthetic and Pedorthic Providers Arkansas were adopted by the State Board of Health of Arkansas at a regular session of said Board held in Little Rock, Arkansas, on the ____ day of _____, 2016.

Nathaniel Smith, M.D., MPH
Secretary of Arkansas State Board of Health
Director, Arkansas Department of Health and
State Health Officer

FINANCIAL IMPACT STATEMENT

PLEASE ANSWER ALL QUESTIONS COMPLETELY

DEPARTMENT Arkansas Department of Health
DIVISION Center for Health Protection
PERSON COMPLETING THIS STATEMENT Connie Melton
TELEPHONE NO. (501) 661-2201 **FAX NO.** (501) 661-2165 **EMAIL:** connie.melton@arkansas.gov

To comply with Ark. Code Ann. § 25-15-204(e), please complete the following Financial Impact Statement and file two copies with the questionnaire and proposed rules.

SHORT TITLE OF THIS RULE Rules and Regulations for Orthotic Prosthetic Pedorthic Providers

1. Does this proposed, amended, or repealed rule have a financial impact? Yes No
2. Is the rule based on the best reasonably obtainable scientific, technical, economic, or other evidence and information available concerning the need for, consequences of, and alternatives to the rule? Yes No
3. In consideration of the alternatives to this rule, was this rule determined by the agency to be the least costly rule considered? Yes No

If an agency is proposing a more costly rule, please state the following:

- (a) How the additional benefits of the more costly rule justify its additional cost;

- (b) The reason for adoption of the more costly rule;

- (c) Whether the more costly rule is based on the interests of public health, safety, or welfare, and if so, please explain; and;

- (d) Whether the reason is within the scope of the agency's statutory authority; and if so, please explain.

4. If the purpose of this rule is to implement a federal rule or regulation, please state the following:

(a) What is the cost to implement the federal rule or regulation?

Current Fiscal Year

General Revenue 0
Federal Funds 0
Cash Funds 0
Special Revenue 0
Other (Identify) 0

Next Fiscal Year

General Revenue 0
Federal Funds 0
Cash Funds 0
Special Revenue 0
Other (Identify) 0

Total 0

Total 0

(b) What is the additional cost of the state rule?

Current Fiscal Year

Next Fiscal Year

General Revenue 0
Federal Funds 0
Cash Funds 0
Special Revenue 0
Other (Identify) 0

Total 0

General Revenue 0
Federal Funds 0
Cash Funds 0
Special Revenue 0
Other (Identify) 0

Total 0

5. What is the total estimated cost by fiscal year to any private individual, entity and business subject to the proposed, amended, or repealed rule? Identify the entity(ies) subject to the proposed rule and explain how they are affected.

Current Fiscal Year

Next Fiscal Year

\$ 0

\$ 0

6. What is the total estimated cost by fiscal year to state, county, and municipal government to implement this rule? Is this the cost of the program or grant? Please explain how the government is affected.

Current Fiscal Year

Next Fiscal Year

\$ 0

\$ 0

7. With respect to the agency's answers to Questions #5 and #6 above, is there a new or increased cost or obligation of at least one hundred thousand dollars (\$100,000) per year to a private individual, private entity, private business, state government, county government, municipal government, or to two (2) or more of those entities combined?

Yes No

If YES, the agency is required by Ark. Code Ann. § 25-15-204(e)(4) to file written findings at the time of filing the financial impact statement. The written findings shall be filed simultaneously with the financial impact statement and shall include, without limitation, the following:

- (1) a statement of the rule's basis and purpose;
- (2) the problem the agency seeks to address with the proposed rule, including a statement of whether a rule is required by statute;
- (3) a description of the factual evidence that:
 - (a) justifies the agency's need for the proposed rule; and

- (b) describes how the benefits of the rule meet the relevant statutory objectives and justify the rule's costs;
- (4) a list of less costly alternatives to the proposed rule and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
- (5) a list of alternatives to the proposed rule that were suggested as a result of public comment and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
- (6) a statement of whether existing rules have created or contributed to the problem the agency seeks to address with the proposed rule and, if existing rules have created or contributed to the problem, an explanation of why amendment or repeal of the rule creating or contributing to the problem is not a sufficient response; and
- (7) an agency plan for review of the rule no less than every ten (10) years to determine whether, based upon the evidence, there remains a need for the rule including, without limitation, whether:
 - (a) the rule is achieving the statutory objectives;
 - (b) the benefits of the rule continue to justify its costs; and
 - (c) the rule can be amended or repealed to reduce costs while continuing to achieve the statutory objectives.