

IN THE MATTER OF

ERIC MYERS, P.T.A.

License No.: A01933

Respondent

*** BEFORE THE STATE BOARD**

*** OF PHYSICAL THERAPY**

*** EXAMINERS**

Case No.: 01-BP-124

*** * * * ***

FINAL CONSENT ORDER

Based on information received and a subsequent investigation by the State Board of Physical Therapy Examiners (the "Board"), and subject to Md. Health Occ. Code Ann. § 13-101 *et seq.* (the "Act"), the Board charged Eric Myers, P.T.A., (the "Respondent"), with violations of the Act. Specifically, the Board charged the Respondent with violation of the following provisions of H.O. § 13-316:

Subject to the hearing provisions of § 13-317 of this subtitle, the Board may deny a license, temporary license, or restricted license to any applicant, reprimand any licensee or holder of a temporary license or restricted license, place any licensee or holder of a temporary license or restricted license on probation, or suspend or revoke a license, temporary license, or restricted license if the applicant, licensee or holder:

- (6) In the case of an individual who is authorized to practice limited physical therapy:
 - (i) Practices limited physical therapy other than is authorized by this title;
- (15) Submits a false statement to collect a fee;
- (16) Violates any provision of this title or rule or regulation adopted by the Board;
- (21) Grossly overutilizes health care services;

- (26) Fails to meet accepted standards in delivering physical therapy care.

The Board further charged the Respondent with the following violations of the Code of Maryland Regulations (Code Md. Regs.) tit. 10, § 38.03.02 Standards:

F. The physical therapist assistant shall use only methods and procedures within the scope of the practice of limited physical therapy;

J. The physical therapist assistant may not initiate treatment until the patient has been evaluated and the treatment planned by the physical therapist.

L. At least once in every ten visits or every 60 calendar days, whichever comes first, there shall be a joint on-site visit with treatment rendered by the physical therapist assistant under the direct supervision of the physical therapist. At this visit the physical therapist is to assess the treatment performed by the physical therapist assistant, reevaluate the patient's program and document the treatment program.

The Board also charged the Respondent with violations of the Code Md. Regs. tit. 10, § 38.03.02-1 Requirements for Documentation:

B. The physical therapist assistant shall adhere to the Board-approved requirements for documentation to the extent that the requirements are applicable to an assistant's scope of practice. The physical therapist assistant shall document the patient's chart for progress notes following the initial visit as follows:

- (1) Date;
- (2) Modalities, procedures, etc.;
- (3) Cancellations, no-shows;

- (4) Subjective response to treatment;
- (5) Objective functional status; and
- (6) Signature, title (PTA), and license number with identifying signatures appearing on the patient's chart, although the flow chart may be initialed.

The Board issued the charges on January 21, 2003. Thereafter, a Case Resolution Conference was held on April 2, 2003. Following the Case Resolution Conference, the parties agreed to resolve the matter by way of settlement. The parties and the Board agreed to the following:

FINDINGS OF FACT

The Board makes the following findings:

1. The Respondent is licensed to practice as a physical therapist assistant in the State of Maryland. The Respondent was originally licensed on August 14, 1996.

2. At all times relevant hereto, the Respondent was employed as a physical therapist assistant by Concentra Medical Centers, Inc. ("Concentra").

3. On or about March 11, 1999, the Board received a complaint from the Special Investigation Unit of the Injured Workers' Insurance Fund ("IWIF") that Concentra overutilized the following physical therapy procedures, as identified by the Current Procedural Terminology ("CPT") assigned to them:

95831- muscle testing, manual (separate procedure); extremity (excluding hand) or trunk, with report

95851- range of motion measurements and report (separate procedure); each extremity (excluding hand) or each trunk section (spine)

4. Thereafter, the Board conducted an investigation of services provided and claims submitted to IWIF by Physical Therapists ("PTs") and Physical Therapist Assistants ("PTAs") employed by Concentra at the time the complaint was filed. The investigation revealed documentation and coding deficiencies in addition to those originally alleged in the IWIF complaint.

CPT CODES

5. CPT codes provide a uniform language that accurately describes medical, surgical and diagnostic procedures. According to the CPT Manual, the CPT is "the most widely accepted nomenclature for the reporting of physician procedures and service under government and private health insurance programs. CPT is also useful for administrative management purposes such as claims processing and for the development of guidelines for medical care review."

a. Codes 95831 and 95851

6. The CPT codes identified in the IWIF complaint, 95831 and 95851, are classified as Neurology and Neuromuscular Procedures.¹ Both codes are appropriate to evaluate a patient who has suffered deficiencies as a result of a neurological disorder or disease such as stroke or multiple sclerosis in order to document the patient's progression or regression. Both of these codes require the physical therapist to generate a separate report.

¹ The most common CPT codes recorded in Concentra patient records are listed in the Physical Medicine and Rehabilitation section, the first two digits are "97." Unless a four-digit CPT code suffix is specified, the suffix for all codes used herein is "0000."

7. The term "separate procedure," as used in the description of the codes in the CPT manual, identifies a procedure that is commonly carried out as an integral component of a total service or procedure. The CPT manual states further:

The codes designated as "separate procedure" should not be reported in addition to the code for the total procedure or service of which it is considered an integral component. However, when a procedure or service that is designated as a "separate procedure" is carried out independently or considered to be unrelated or distinct from other procedures/services provided at that time, it may be reported by itself, or in addition to other procedures/services by appending the modifier "-59" to the specific "separate procedure" code to indicate that the procedure is not considered to be a component of another procedure, but is a distinct, independent procedure. This may represent a different session or patient encounter, different procedure or surgery, different site or organ system, separate incision/excision, separate lesion, or separate injury (or area of injury in extensive injuries).

8. Code 95831 is defined in the CPT manual as follows: Muscle testing, manual (separate procedure); extremity (excluding hand) or trunk, with report.

9. Code 95851 is defined in the CPT manual as follows: Range of motion ("ROM") measurements and report (separate procedure); each extremity (excluding hand) or each trunk section (spine).

10. Objective findings such as muscle strength and range of motion are a standard of physical therapy documentation and are to be performed once a week at a minimum. It is not standard physical therapy practice to bill separately for these measurements except when being performed as re-evaluation. It is standard physical therapy practice to assess and interpret objective findings that

result from muscle testing and range of motion testing in order to determine whether changes should be made to the patient's treatment plan and/or goals.

b. Code 97110-Therapeutic exercise

11. Therapeutic exercise (CPT code 97110) is classified as a therapeutic procedure. A therapeutic procedure is "a manner of effecting change through the application of clinical skills and/or services that attempt to improve function. Physician or therapist required to have direct (one on one) patient contact."

12. Therapeutic exercise is defined in the CPT manual as follows: Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercise to develop strength and endurance, range of motion and flexibility.

13. Instructing a patient how to perform the exercise is a component of a therapeutic exercise and is not to be billed as a separate charge by the provider.

c. Code 97112- Neuromuscular re-education

14. Neuromuscular re-education (Code 97112) is classified as a therapeutic procedure and incorporates all of the elements of therapeutic exercises. Neuromuscular re-education is further defined as the neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture and proprioception.

d. Code 97530- Therapeutic activity

15. Therapeutic activity (Code 97530) is classified as a therapeutic procedure and is defined as, "direct (one on one) patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes."

General Allegations of Deficiencies

16. A PTA is not licensed to perform the following: evaluations or re-evaluations, assessments, progress reports, changes to treatment plan without consulting the PT and documenting the consultation, discharges or discharge summaries.

17. The Respondent documented and/or billed for evaluation codes, documented a change in the treatment plan, recommendation or progress report and documented discharges on several of the patient charts that were reviewed, as set forth in detail below. In addition, the Respondent also documented billing for procedure codes for exercise that were not supported by documentation of treatment, as detailed below.

Patient-Specific Allegations

Patient A

18. Patient A, a female born in 1963, initially presented to Concentra on October 27, 1998 with complaints of left shoulder strain sustained in a work-related incident. Patient A was evaluated and treated by a PT on that date.

19. The Respondent treated Patient A on October 28, 1998 and noted the following charges: Procedures - Therapeutic Exercise (97110), Neuromuscular Re-education (97112) and Therapeutic Activity (97530).²

² Charges under the "Supplies" category are not at issue and are not set forth herein.

20. The Respondent's documentation fails to support charging under the Neuromuscular Re-education and Therapeutic Activity codes.

21. The Respondent treated Patient A on October 29, 1998 and noted the following charges: Modalities - Hot/Cold Packs (97010) and Electrical Stimulation (97041); Procedures - Therapeutic Exercise (97110), Neuromuscular Re-education (97112), Myofascial Release (97250); and Tests - Range of Motion (95851).

22. The Respondent's documentation fails to support charging under the Neuromuscular Re-education and Therapeutic Activity codes. In addition, the Respondent practiced beyond the scope of his license when he conducted and charged for a test and measure and assessed the patient's status without appropriate authorization.

Patient B

23. Patient B, a female born in 1968, initially presented to Concentra on June 16, 1998 after twisting her right ankle in a work-related incident. Patient B was evaluated and treated by a PT on that date.

24. The Respondent treated Patient B on June 17, 1998 and noted the following charges: Modalities - Hot/Cold Packs (97010) and Electrical Stimulation (97041); Procedures - Therapeutic Exercise (97110), Neuromuscular Re-education (97112) and Therapeutic Activity (97530); and Tests - Range of Motion (95851).

25. The Respondent's documentation of the June 17, 1998 visit fails to support charging under the Neuromuscular Re-education or Therapeutic Activity

(97530) codes. The Respondent practiced beyond the scope of his license in conducting and charging for tests and measures on Patient B and assessing her status without appropriate authorization.

26. The Respondent treated Patient B on June 19, 1998 and noted the following charges: Modalities - Hot/Cold Packs (97010) and Electrical Stimulation (97041); Procedures - Therapeutic Exercise (97110), Neuromuscular Re-education (97112) and Therapeutic Activity (97530).

27. The Respondent's documentation fails to support charging under the Neuromuscular Re-education (97112) and Therapeutic Activity (97530) codes.

28. Patient B's final treatment visit was on June 23, 1998. The Respondent treated Patient B on June 23, 1998 and noted the following charges: Procedures - Therapeutic Exercise (97110) and Therapeutic Activity (97530). The Respondent also noted that Patient B was to be evaluated by a physician.

29. The Respondent's documentation fails to support charging under the Neuromuscular Re-education and Therapeutic Activity codes. The Respondent practiced beyond the scope of his license when he recommended Patient B's discharge without appropriate authorization.

Patient C

30. Patient C, a female born in 1956, initially presented to Concentra on June 19, 1998 after sustaining a work-related injury to her right hand. Patient C was evaluated and treated by a PT on that date.

31. The Respondent treated Patient C on June 29, July 1, July 6, July 7 and July 9, 1998 and noted, *inter alia*, the following charges: Procedures - Therapeutic Exercise (97110), Neuromuscular Re-education (97112) and Therapeutic Activity (97530). On the July 9, 1998 visit, the Respondent charged under the Range of Motion (95851) code, in addition to the other codes noted above.

32. The Respondent's documentation fails to support charging under the Neuromuscular Re-education, Therapeutic Activity codes for the visits listed above. In addition, the Respondent practiced beyond the scope of his license when he conducted and charged for tests and measures and assessed the patient's status without appropriate authorization.

Patient D

33. Patient D, a female born in 1963, initially presented to Concentra on November 18, 1998 after injuring her left shoulder in a work-related motor vehicle accident. Patient D was evaluated and treated by a PT on that date.

34. The Respondent treated Patient D on November 19, 1998 and noted the following charges: Modalities - Hot/Cold Packs (97010) and Electrical Stimulation (97041); and Procedures - Therapeutic Exercise (97110), Neuromuscular Re-education (97112) and Therapeutic Activity (97530).

35. The Respondent's documentation of the November 19, 1998 visit fails to support charging under the Neuromuscular Re-education or Therapeutic Activity codes.

36. The Respondent treated Patient D on November 20, 1998 and noted the following charges: Modalities - Hot/Cold Packs (97010) and Electrical Stimulation (97041); Procedures - Therapeutic Exercise (97110), Neuromuscular Re-education (97112), Myofascial Release (97250) and Therapeutic Activity (97530); and Tests - Range of Motion (95851).

37. The Respondent's documentation of the November 19, 1998 visit fails to support charging under the Neuromuscular Re-education or Therapeutic Activity codes. In addition, the Respondent practiced beyond the scope of his license when he conducted and charged for tests and measures and assessed the patient's status without appropriate authorization.

38. The Respondent treated Patient D on November 23, 1998 and noted the following charges: Modalities - Hot/Cold Packs (97010) and Electrical Stimulation (97041); Procedures - Therapeutic Exercise (97110) and Neuromuscular Re-education (97112).

39. The Respondent's documentation fails to support charging under the Neuromuscular Re-education code.

40. The Respondent treated Patient D on November 25, 1998 and noted the following charges: Procedures - Therapeutic Exercise (97110), Myofascial Release (97250) and Therapeutic Activity (97530); and Tests - Range of Motion (95851).

41. The Respondent's documentation fails to support the charges under the Myofascial Release and Therapeutic Activity codes. In addition, the Respondent practiced beyond the scope of his license when he conducted and

charged for tests and measures and assessed the patient's status without appropriate authorization.

Patient E

42. Patient E, a male born in 1965, initially presented to Concentra on December 11, 1998 with complaints of cervical strain. Patient E was evaluated and treated by a PT on that date.

43. The Respondent treated Patient E on December 15, December 16 and December 17, 1998. On each visit, the Respondent noted the following charges: Therapeutic Exercise (97110) (2 units), Neuromuscular Re-education (97112), Myofascial Release (97250) and Therapeutic Activity (97530). On December 16, 1998, the Respondent also charged under Tests - Range of Motion (95851) (2 units).

44. The Respondent's documentation fails to support all of the codes charged except Therapeutic Exercise. In addition, the Respondent practiced beyond the scope of his license when he conducted and charged for a test and measure and assessed the patient's status without appropriate authorization.

Patient F

45. Patient F, a male born in 1964, initially presented to Concentra on September 18, 1998 with a contusion of his left forearm. Patient F was evaluated and treated on that date by a PT.

46. The Respondent treated Patient F on September 23, 1998 and noted the following charges for that visit: Modalities - Hot/Cold Packs (97010) and Electrical Stimulation (97041); Procedures - Therapeutic Exercise (97110),

Neuromuscular Re-education (97112) and Therapeutic Activity (97530); and Tests - Range of Motion (95851).

47. The Respondent's documentation fails to support the charges under the Neuromuscular Re-education and Therapeutic Activity codes. Moreover, the Respondent practiced beyond the scope of his license when he conducted and charged for a test and measurement and assessed the patient's status without appropriate authorization.

48. Patient F presented for his last treatment visit on September 25, 1998. The Respondent treated Patient F on that date and noted the following charges: Modalities - Hot/Cold Packs (97010) and Electrical Stimulation (97041); Procedures - Therapeutic Exercise (97110), Neuromuscular Re-education (97112) and Therapeutic Activity (97530). The Respondent also noted in the Assessment section of the progress note: "goals partially met."

49. The Respondent's documentation fails to support charging under the Neuromuscular Re-education or Therapeutic Activity codes. In addition, the Respondent acted beyond the scope of his license when he assessed the patient's status and discharged him from treatment without appropriate authorization.

Patient G

50. Patient G, a male born in 1971, initially presented to Concentra on July 9, 1998 complaining of a sprained right ankle. Patient G was evaluated on that date by a PT.

51. Patient G was treated by PTs for multiple visits and presented for his last treatment visit on July 24, 1998. The Respondent treated Patient G on that date and noted the following charges: Procedures - Therapeutic Exercise (97110), Neuromuscular Re-education (97112) and Therapeutic Activity (97530). The Respondent also noted in the Assessment section of the progress note: "functional goals met."

52. The Respondent's documentation fails to support charging under the Neuromuscular Re-education or Therapeutic Activity codes. In addition, the Respondent acted beyond the scope of his license when he assessed the patient's status and discharged him from treatment without appropriate authorization.

Patient H

53. Patient H, a female born in 1972, initially presented to Concentra on July 7, 1998 after injuring her right hand in a work-related incident. Patient H was evaluated by a PT on that date.

54. The Respondent treated Patient H on July 8, 1998, her last treatment visit. The Respondent noted the following charges: Modalities - Hot/Cold Packs (97010) and Electrical Stimulation (97041); Procedures - Therapeutic Exercise (97110), and Therapeutic Activity (97530); Tests - Range of Motion (95851). The Respondent also noted in the Assessment section of the progress note: "goals not met."

55. The Respondent's documentation fails to support charging under the Therapeutic Activity codes. Moreover, the Respondent practiced beyond the

scope of his license when he conducted and charged for a test and measure, assessed Patient H and discharged her without appropriate authorization.

Patient I

56. Patient I, a male born in 1964, initially presented to Concentra on October 27, 1998 after injuring his left knee in a work-related incident. Patient I was evaluated by a PT on that date.

57. The Respondent treated Patient I on October 28, 1998 and noted the following charges: Modalities - Hot/Cold Packs (97010) and Electrical Stimulation (97041); Procedures - Therapeutic Exercise (97110), Neuromuscular Re-education (97112) and Therapeutic Activity (97530).

58. The Respondent's documentation of the October 28, 1998 visit fails to support charging under the Neuromuscular Re-education and Therapeutic Activity codes.

59. The Respondent treated Patient I on October 29, 1998, his last treatment visit. The Respondent noted the following charges: Procedures - Therapeutic Exercise (97110) and Neuromuscular Re-education (97112); and Tests - Range of Motion (95851). The Respondent also noted in the Assessment section of the progress note: "goals met."

60. The Respondent's practiced beyond the scope of his license by conducted and charged for a test and measure, assessed Patient I and discharged him from treatment without appropriate authorization.

Patient J

61. Patient J, a male born in 1978, initially presented to Concentra on October 19, 1998 after injuring his right hand in a work-related incident. Patient J was evaluated and treated on that date by a PT.

62. Patient J returned for his last treatment visit on October 20, 1998 and he Respondent treated him on that date. The Respondent noted the following charges for that visit: Modalities - Iontophoresis (97033); Procedures - Therapeutic Exercise (97110), Neuromuscular Re-education (97112) and Therapeutic Activity (97530); Tests - Range of Motion (95851) and Jamar 1 (97750). The Respondent also noted that Patient J was to be followed up by the Concentra physician.

63. The Respondent's documentation of the October 20, 1998 visit fails to support charging under the Neuromuscular Re-education or Therapeutic Activity codes. In addition, the Respondent practiced beyond the scope of his license when he conducted and charged for test and measures, assessed Patient J and discharged him from treatment without appropriate authorization.

Patient K

64. Patient K, a female born in 1958, initially presented to Concentra on December 2, 1998 after twisting her left ankle in a work-related incident. Patient K was evaluated and treated by a PT on that date.

65. The Respondent treated Patient K on December 14, 1998 and noted the following charges: Procedures - Therapeutic Exercise (97110) (2 units), Neuromuscular Re-education (97112) and Myofascial Release (97250).

66. The Respondent's documentation fails to support charging under the Myofascial Release or Therapeutic Activity codes.

67. The Respondent treated Patient K on December 16, 1998 and noted the following charges: Procedures - Therapeutic Exercise (97110) (2 units) and Therapeutic Activity (97530); and Tests - Range of Motion (95851) (2 units).

68. The Respondent's documentation fails to support charging under the Neuromuscular Re-education and Therapeutic Activity codes. In addition, the Respondent practiced beyond the scope of his license when he conducted and charged for tests and measures and assessed the patient without appropriate authorization.

69. Patient K's last treatment visit was on January 29, 1999 and the Respondent treated her on that date. The Respondent noted the following charges: Procedures - Therapeutic Exercise (97110) (2 units) and Neuromuscular Re-education (97112). The Respondent noted in the Assessment section of the progress note: "functional goals met."

70. The Respondent's documentation fails to support charging under the Neuromuscular Re-education code. In addition, the Respondent practiced beyond the scope of his license when he assessed and discharged Patient K without appropriate authorization.

Patient L

71. Patient L, a male born in 1968, initially presented to Concentra on July 6, 1998, after injuring his right forearm and wrist in a work-related incident.

Patient L was evaluated and treated on that date by a PT.

72. The Respondent treated Patient L on July 9, 1998, the patient's last treatment visit. The Respondent noted the following charges: Procedures - Therapeutic Exercise (97110), Neuromuscular Re-education (97112) and Therapeutic Activity (97530); and Tests - Range of Motion (95851). The Respondent noted in the Assessment section of the progress note: "Goals met."

73. The Respondent's documentation of the July 9, 1998 visit fails to support charging under the Neuromuscular Re-education or Therapeutic Activity codes. In addition, the Respondent practiced beyond the scope of his license when he conducted and charged for a test and measure, assessed and discharged Patient L without appropriate authorization.

Patient M

74. Patient M, a female born in 1953, initially presented to Concentra on October 19, 1998 after spraining her left ankle. She was evaluated and treated by a PT on that date.

75. The Respondent treated Patient M on the following dates: October 20, 21, 23, 26, 27, 29, 1998 and November 2, 4, and 6, 1998. The Respondent noted the following charges for procedures on each of the visits: Therapeutic Exercise (97110), Neuromuscular Re-education (97112) and Therapeutic Activity (97530). The Respondent also charged under the Range of Motion (95851) code on October 21, 26 and 29, 1998.

76. The Respondent's documentation fails to support charging under the Therapeutic Activity (97530) or Neuromuscular Re-education (97112) codes for all of the visits. In addition, the Respondent practiced beyond the scope of his

license when he conducted and charged for tests and measures and assessed the patient's status without appropriate authorization.

CONCLUSIONS OF LAW

Based on the foregoing Findings of Fact, the Board finds that the Respondent violated Md. Health Occ. Code Ann. §§ 13-316(6)(i), (15), (16), (21) and (26). The Board also finds that the Respondent violated Code Md. Regs. tit. 10, §38.03.02(F), (J), and (L) and § 10.38.03.02-1(B).

ORDER

Based on the foregoing Findings of Fact, Conclusions of Law and agreement of the parties, it is this 20th day of MAY, 2003, by a majority of a quorum of the Board,

ORDERED that the Respondent shall be placed on probation for a period of at least one (1) year, subject to the following conditions:

1. The Respondent shall take the Board-approved law and ethics course and pass the associated examination administered by the Board, within six (6) months of the period of probation;
2. The Respondent shall successfully complete a Board-approved documentation course;
3. The Respondent shall successfully complete a Board-approved billing course;
4. The Respondent may apply the above coursework to the Respondent's continuing education requirements for licensure renewal;

AND IT IS FURTHER ORDERED that if the Respondent fails to comply with any of the terms or conditions of probation set forth above, that failure shall be deemed a violation of this Order; and it is further

ORDERED that the Respondent shall practice in accordance with the laws and regulations governing the practice of physical therapy in Maryland; and it is further

ORDERED that should the Board receive a report that the Respondent's practice is a threat to the public health, welfare and safety, the Board may take immediate action against the Respondent, including suspension or revocation, providing notice and an opportunity to be heard are provided to the Respondent in a reasonable time thereafter. Should the Board receive in good faith information that the Respondent has substantially violated the Act or if the Respondent violates any conditions of this Order or of Probation, after providing the Respondent with notice and an opportunity of a hearing, the Board may take further disciplinary action against the Respondent, including suspension or revocation. The burden of proof for any action brought against the Respondent as a result of a breach of the conditions of the Order of Probation shall be upon the Respondent to demonstrate compliance with the Order or conditions; and it is further

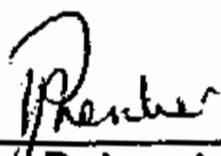
ORDERED that the Respondent shall bear the expenses associated with the Consent Order; and it is further

ORDERED that, at the end of the probationary period, the Respondent may petition the Board to be reinstated without any conditions or restrictions on

the Respondent's license, provided the Respondent can demonstrate compliance with the conditions of this Order. Should the Respondent fail to demonstrate compliance, the Board may impose additional terms and conditions of Probation, as it deems necessary; and it is further

ORDERED that for purposes of public disclosure, as permitted by Md. State Gov't Code Ann. § 10-617(h) (Repl. Vol. 1999), this document consists of the foregoing Findings of Fact, Conclusions of Law and Order and that the Board may also disclose same to any national reporting data bank to which it is mandated to report.

5.20.03
Date


Penelope D. Lescher, M.A., P.T., M.C.S.P., Chair
State Board of Physical Therapy Examiners

CONSENT

I, Eric Meyers, PTA, by affixing my signature hereto, acknowledge that:

1. I am represented by an attorney and have been advised by my attorney of the legal implication of signing this Consent Order;
2. I am aware that without my consent, my license to practice physical therapy in this State cannot be limited except pursuant to the provisions of H.O. § 13-317 and the Maryland Administrative Procedure Act, codified at State Gov't §§ 10-219 *et seq.*
3. I am aware that I am entitled to a formal evidentiary hearing before the Board;
4. By this Consent Order, I hereby consent and submit to the foregoing Findings of Fact, Conclusions of Law and Order, provided the Board adopts the foregoing Consent Order in its entirety. I acknowledge the validity of this Consent Order as if entered into after the conclusion of a formal evidentiary hearing in which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my behalf and to all other substantive and procedural protections as provided by law. I acknowledge the legal authority and the jurisdiction of the Board to initiate these proceedings and to issue and enforce this Consent Order. I affirm that I am waiving my right to appeal.
5. I acknowledge that failing to abide by the condition set forth in this Order, I may, after an opportunity to be heard, suffer disciplinary action, including revocation of my license to practice limited physical therapy in the State of Maryland.

6. While I have consented and submitted to the foregoing Findings of Fact, Conclusions of Law and Order, I did not intentionally, knowingly or willfully submit a false statement to collect a fee.

7. I voluntarily sign this Consent Order after having an opportunity to consult with an attorney, without reservation, and I fully understand the language, meaning and terms of this Consent Order.

5/17/03
Date

[Signature]
Eric Meyers, PTA
Respondent

STATE OF: Maryland
CITY/COUNTY OF: Sturford

I HEREBY CERTIFY that on this 17 day of May, 2003, before me, a Notary of the State of Maryland and the City/County of Sturford personally appeared Eric Meyers, P.T. A., and made oath in due form of law that signing the foregoing Consent Order was his/her voluntary act and deed, and that the statements made herein are true and correct.

AS WITNESS my hand and notarial seal.

[Signature]
Notary

My Commission expires: 5/10/05