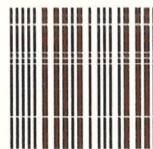


r. ggs
r. Perry Rd.
MS 39180



UNITED STATES
POSTAL SERVICE

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U.S. POSTAGE
PAID
VICKSBURG, MS
39180
OCT 27, 14
AMOUNT

\$1.19

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FIRST CLASS

Louisiana Board of Physical Therapy
Attn: Charlotte Martin
104 Fairlane Dr.
Lafayette, LA 70507



State of Louisiana
Department of Health and Hospitals
Louisiana Physical Therapy Board
104 Fairlane Drive Lafayette, Louisiana 70507
337/262-1043 FAX 337/262-1054

CASE NUMBER: 2014I010

DATE: June 3, 2014

RE: Informal Consent Order Regarding Late License Renewal

Licensee, Laura Briggs License No. 08524R, (referred to herein as "Applicant") acknowledges that she failed to timely complete and submit application for renewal of her Physical Therapy license for the renewal period beginning February 1, 2013. License renewals are required by law and Board Rules to be made "by March 31 but no later than April 30." Pursuant to La. 37:R.S. 2417 B a license not renewed in accordance with the Rules of the Board shall automatically expire "at the end of its term" after which the licensee shall not practice in Louisiana. Applicant acknowledges that she has practiced physical therapy in Louisiana from May 1, 2014 through June 3, 2014 without a valid license in violation of La. R.S. 37:2417 B. These facts and provisions of the Physical Therapy Practice Act and Board Rules provide a basis and authority for this Consent Order.

Applicant has now applied for reinstatement of her license. She agrees to the following terms and conditions with the Louisiana Physical Therapy Board (the Board) for late renewal:

A. Applicant will pay to the Board, in addition to regular renewal and reinstatement fees, the sum of \$250 as reimbursement for the administrative and legal time and expenses involved in late renewal of her license. Payment by cashier's check or credit card will be made by June 6, 2014. Any additional time for making this payment requires written approval by the Board.

B. Applicant shall provide documentation that is satisfactory to the board with this agreement which reflects that all charges to patient accounts have be reversed for all treatments provided by applicant during the period when he was not licensed. Documentation will be sent to the Executive Director of the Louisiana Physical Therapy Board to 104 Fairlane Drive, Lafayette, LA 70507 no later than November 30, 2014.

C. Applicant voluntarily gives her consent to this Informal Consent Order, the terms of which were approved by the Board at its May 22, 2014 meeting.

Laurel [Signature] PT
Applicant

Charlotte Martin
Charlotte A. Martin, Executive Director
On behalf of the Board

Date: 6.4.14



Betty Chiles
6/4/2014

MONTH/YEAR: May 2014

Explanation of Terms: E = Evaluation under 16 miles O=Oasis under 16 miles T = Treatment under 16 miles V = Evaluation over 16 miles A=Oasis over 16 miles R = Treatment over 16 miles
 L = Evaluation in Clinic I = Treatment in Clinic C= Oasis in Clinic M=Missed Visit NC= No Charge

Patient Name	Agency	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Discharged	
C....., G.....	FL NC																																38	
Non-billable total	FL		\$90																															
W....., D.....	HC NC NC																																	69
W....., N.....	HC																																	9
B....., D.....	HC																																	4
W....., M.....	HC																																	9
E....., V.....	HC																																	69
M....., S.....	HC																																	13
P....., G.....	HC																																	7
Non-billable total	HC		\$1,170																															
M....., K.....	CHW																																	44
G....., J.....	CHW																																	12
Non-billable total	CHW		\$255																															
H....., M.....	HCR																																	10
S....., S.....	HCR																																	22
Non-billable total	HCR		\$170																															
S....., A.....	UHC																																	12
B....., J.....	UHC																																	4
J....., O.....	UHC																																	6
C....., B.....	UHC																																	2
D....., V.....	UHC																																	43
E....., R.....	UHC																																	98
P....., G.....	UHC																																	16
Non-billable total	UHC		\$1,200																															

Total Non-billable Visits	34
Total Non-billable Miles	487

October, 10, 2014

To: Louisiana Physical Therapy Board
104 Fairlane Drive
Lafayette, LA 70507

From: Laura J Briggs, PT
4849 Fisher Ferry Rd.
Vicksburg, MS 39180

Attn: Charlotte Martin

Re: Informal Consent Order Case #2014I010

Dear Board Members,

This letter is to inform you that as requested, Good Samaritan Physical Therapy, employer of Laura Briggs, License No. 08524R has complied with Rule 187.c. No patient has been charged for services provided by Laura during the time that her license was lapsed. The amount not charged in the home health setting during that time totals \$2,885. The charges in the outpatient setting during that time were deleted from our billing system prior to being submitted when the month of April 2014 was closed out on May 6, 2014. We apologize for any inconvenience this has caused the board and appreciate your assistance in resolving the matter.

Sincerely,


Laura J Briggs



Subscribed and sworn to before me in my presence, this 27th day of October 2014, a Notary Public in and for the County of Hinds State of MS
Kim Shuttlesworth
(signature) Notary Public
My Commission Expires 1/13 2018