



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

CASE NUMBER: 2009-12

DATE: February 10, 2009

RE: *Informal Consent Order Regarding Late License Renewal*

Licensee Ali Hebert, License No.03666 (referred to herein as Applicant) acknowledges that she failed to timely complete and submit application for renewal of her Physical Therapy license for the year 2009. While license renewals are required by law and Board Rules to be made "on or before December 31 of each year", applicant failed to submit her renewal timely, resulting in a failure to comply with mandatory requirements as of January 1, 2009. This is a violation of the Physical Therapy Practice Act [La. R.S. 37:2407] and of the Rules and Regulations of the Louisiana State Board of Physical Therapy Examiners [46 LAC Sec. 165]. These facts and provisions of law provide the 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 State Board of Physical Therapy Examiners (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 check will be made by March 30, 2009.

B. Applicant worked without a valid license from January 1, 2009 to January 20, 2009. Applicant shall provide documentation with this agreement from her employer(s) which reflects that all charges to patient accounts have been reversed for all treatments provided by applicant during the period when she was not licensed.

C. Applicant voluntarily gives his consent to this Informal Consent Order, the terms of which were approved by the Board at its January 24, 2009 meeting.

Ali Hebert PT
Applicant

Date: 2-25-09

Cheryl Gaudin
Cheryl Gaudin, Executive Director
On behalf of the Board



Ryan or Alexandra M. Hebert
13001 LA Highway 35
Kaplan, LA 70548

84-7041/2652

1174

2-25 2009

Pay to the Order of LA State Board of PT Examiners \$ 250.00/X

Two hundred fifty ^{no}/₁₀₀ ————— Dollars

Security features are included. Details on back.

Iberia Bank
New Iberia, Louisiana 70560-6301

For License Renewal

Alexandra M. Hebert

MP

⑆ 265270413⑆ 0912443726⑈ 1174




Ryan or Alexandra M. Hebert
13001 LA Highway 35
Kaplan, LA 70548

84-7041/2652

1174

2-25 2009

Pay to the Order of LA State Board of PT Examiners | \$ 250.00 / X

Two hundred fifty & no/100 ————— Dollars  Security features are included. Details on back.

Iberia Bank
New Iberia, Louisiana 70560-6301

For License Renewal

Alex Hebert MP

⑆ 265270413⑆ 0912443726⑆ 1174

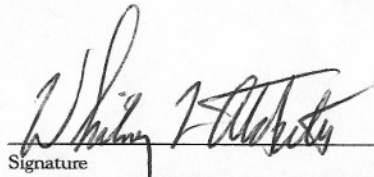
**CERTIFICATION REGARDING FEES
FOR PHYSICAL THERAPY SERVICES**

The undersigned representative of Whitney Atchetee Physical Therapy which is the
(Name of facility)
employer of Ali Hebert, a physical therapist, subject to licensure by the
Louisiana State Board of Physical Therapy Examiners, whose license number is 03666,
acknowledges receipt of the Informal Consent Order for Late Renewal of License between the
Board and licensee. This Consent Order indicates that between January 1, 2009 and January 20,
2009, Ali Hebert did not hold a valid license to provide physical therapy services as required by
law. During this period, Licensee continued to work at this facility and treat patients who were
billed for physical therapy services.

Since Licensee was not legally authorized to provide physical therapy services during the
period indicated above, I certify to the Board that charges for those physical therapy services
provided by Licensee during the period identified above have now been reversed or refunded to
the payor with appropriate notification directly to the patient. Records of this facility document
that these unearned fees have been reversed or refunded and such records may be inspected by
Board representatives by contacting me during regular business hours at (337) 893-3258.

(Telephone number)

I certify that the above information is true and correct and that I have personal knowledge
of its accuracy.



Signature

Whitney L. Atchetee

Print Name

Owner

Title

Whitney Atchetee Physical Therapy

Facility
CLinic

**CERTIFICATION REGARDING FEES
FOR PHYSICAL THERAPY SERVICES**

The undersigned representative of Long Term Acute Care of Acadiana which is the
(Name of facility)
employer of Ali Hebert, a physical therapist, subject to licensure by the
Louisiana State Board of Physical Therapy Examiners, whose license number is 03666,
acknowledges receipt of the Informal Consent Order for Late Renewal of License between the
Board and licensee. This Consent Order indicates that between January 1, 2009 and January 20,
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that these unearned fees have been reversed or refunded and such records may be inspected by
Board representatives by contacting me during regular business hours at 337 - 8399880.

(Telephone number)

I certify that the above information is true and correct and that I have personal knowledge
of its accuracy.

David Serri
Signature

S. SAIED SERRI
Print Name

CEO
Title

LTAC OF ACADIANA
Facility