



Present from the Public:

Debbie Ryan, Chief Executive Officer, Alaska Chiropractic Society  
Sheri Ryan, Chief Operating Officer, Alaska Chiropractic Society

**Agenda Item 4**

**Review Agenda**

**Time: 10:37 a.m.**

After the Roll Call, Chair, Dr. Larson asked the board to review the agenda.

**On a motion duly made by Jonathan Vito, requesting unanimous consent, and approved unanimously without any objections, it was**

**RESOLVED to amend the agenda by adding a discussion on advanced chiropractic practice to New Business.**

**On a motion duly made by John Wayne Aderhold, requesting unanimous consent, and approved unanimously without any objections, it was**

**RESOLVED to accept the agenda as amended.**

**Agenda Item 5**

**Review/Approve Meeting Minutes**

**Time: 10:42 a.m.**

The board reviewed the meeting minutes from January 22<sup>nd</sup>, 2016, February 16<sup>th</sup>, 2018, and February 27<sup>th</sup>, 2018.

**On a motion duly made by John Wayne Aderhold, requesting unanimous consent, and approved unanimously without any objections, it was**

**RESOLVED to approve the meeting minutes for January 22<sup>nd</sup>, 2016, February 16<sup>th</sup>, 2018, and February 27<sup>th</sup>, 2018 as written.**

**Agenda Item 6**

**Board Business**

**Time: 10:46 a.m.**

Ethics Report

Dr. Larson addressed ethics reporting. There were no ethical violations to report.

Review Goals and Objectives

With no ethical issues to report, the board's liaison, Thomas Bay, began conversation with the board on their goals and objectives. Mr. Bay reminded the board that they still needed to draft their goals and objectives for Fiscal Year 2018. He reminded Dr. Larson that, as the new Chairman, he will need to write the narrative in the annual report, and is allowed to work with one other board member.

**TASK:**

**Dr. Larson and Dr. Vito will work together to complete the board's goals and objectives for Fiscal Year 2018.**

### Ratify Licenses

Hearing nothing further on goals and objectives, Dr. Larson moved to address the ratification of licensees for applicants who sat for the February 16<sup>th</sup>, 2018 examination.

**On a motion duly made by Jonathan Vito, seconded by John Wayne Aderhold, and approved unanimously without any objections, it was**

**RESOLVED to ratify the licenses for Larry Miggins and Zachary Richards.**

### Position Statements

With no other applications to review, the board was prompted by Chairman Larson to discuss their position statements. Dr. Vito addressed, to the board, the position statement both him and Dr. Larson drafted, regarding the board's position that chiropractic physicians licensed in the State of Alaska are qualified to perform the FAA Basic Med Exam for a private pilot's license. This examination is also known as the Comprehensive Medical Examination for a private pilot's license, and is referred to as such in the position statement. The board decided to amend the position statement by adding language to the definition of "pilot."

**On a motion duly made by Brian Larson, seconded by Jonathon Vito, and approved unanimously without any objections, it was**

**RESOLVED to amend the position statement by adding "private" and "license" to the definition of "pilots," as to read, "private pilot's license," and to accept the position statement as amended.**

### **TASK:**

**Mr. Bay will send the board's position statement, regarding the Comprehensive Medical Examination for a private pilot's license, for publication on their website.**

### **TASK:**

**Mr. Bay will contact Michael Megehee and inform him of the board's position statement on chiropractors being able to perform the Comprehensive Medical Examination for a private pilot's license.**

Dr. Vito began discussion on injections. Mr. Bay reminded the board that the prior Chair, Dr. Walter Campbell, suggested that the board create a position statement regarding injections, because issues keep coming up for discussion and there is no position statement written yet that pertains to injections.

### **TASK:**

**Dr. Reinhardt and Dr. Larson will write a position statement on injections. They will present it to the board for approval at the next board meeting.**

Dr. Vito addressed the topic of concussive analysis and return-to-play guidelines with the board. Dr. Larson informed the board that there was still no information that has been provided for him to be able to write the position statement. The board, citing lack of information, decided to table this position statement until the next board meeting.

**TASK:**

**Dr. Larson will gather information on concussive analysis and return-to-play guidelines, and present his findings at the next board meeting.**

**Agenda Item 7                    Utilization Review Committee Update                    Time: 11:14 a.m.**

Having finished the board's position statements, Mr. Bay addressed the Utilization Review Committee. He reminded the board that the vacant seats on the Utilization Review Committee had been filled. The board spoke briefly on the topic, expressing their excitement that the committee had finally been filled.

**Agenda Item 8                    FCLB/NBCE/CCE Update                    Time: 11:17 a.m.**

Dr. Larson informed the board of his recent travel to the FCLB/NBCE conference in Dallas, Texas. He presented the board with an overview of information that was covered during the conference. Dr. Larson told the board that an important topic that was focused on during the conference was cerebral artery dissection. He said that there was no new information regarding this topic, but that the conference made a point to make the public aware of the research that is available and current, and that the research is in overwhelming support of chiropractors, and demonstrates that strokes are not caused by chiropractic.

Mr. Bay asked Dr. James Morris if he was still in the meeting via teleconference, because he had been dropping in and out of service during the meeting. Dr. Morris responded, but interjected that he had missed the position statement on injections, and wanted to be apprised of the situation.

**Agenda Item 6                    Board Business                    Time: 11:23 a.m.**

Position Statements

Drs. Larson and Vito summarized reasons over the years as to why the board feels obliged to write a position statement on injections, noting that there have been a lot of questions of what can and cannot be injected in the profession of chiropractic. After a brief overview on injections the board went back to speaking about the FCLB/NBCE conference.

**Agenda Item 8                    FCLB/NBCE/CCE Update                    Time: 11:26 a.m.**

Dr. Larson continued to inform the board on the highlights from the FCLB/NBCE conference. Dr. Larson shared with the board a presentation that was given on the opioid epidemic, from Dr. Sherry McAllister, the Executive Vice President of the Foundation for Chiropractic Progress. One important fact Dr. Larson shared with the board was that, when it comes to worker's compensation, that 46% of injured workers who see a surgeon as their portal of entry receive surgery. Only 1.5% of injured workers who see a chiropractor as their portal of entry receive surgery. Dr. Larson also stated that 25% of first opioid prescriptions are for lower back pain, which further suggests that chiropractic is the better portal of entry. Dr. Larson informed the board that he has already reached out to Sheri Ryan, from the Alaska Chiropractic Society (ACS), to see if she could get in contact with Sherry McAllister to give the presentation at the ACS convention.

Dr. Larson presented the board with the National Board of Chiropractic Examiner's (NBCE) presentation titled, *Ethics for Public Protection*. This presentation explains in detail an essay exam that is given by the NBCE that assesses an individual's understanding of ethics and boundaries in a professional setting. Dr. Larson informed the board that, at this time, the chiropractic profession is the

only profession that has a standardized national Part IV board exam, where all schools at the same time, same day, take the exact same exam, and the exam is administered by the same organization. Other professions have asked the NBCE to organize such an exam for their respective professions. Dr. Larson stated that the NBCE is branching out and expanding their services to include Dentistry, Medical Doctors, Nursing, and Social Workers.

Dr. Larson also informed the board that the NBCE is developing additional services related to creating and administering jurisprudence exams, specific to each state, across the country. The board discussed the possibility of, in the future, making the jurisprudence exam available nationally, instead of in person, prior to each board meeting. The board also suggested that a good idea would be to get an NBCE representative, via teleconference, to explore the idea of ADMINISTERING THE ALASKA JURISPRUDENCE EXAMINATION AT CERTIFIED TESTING CENTERS ACROSS THE UNITED STATES.

Having nothing further to address regarding the FCLB, NBCE, or CCE the Board decided to recess for lunch.

**Dr. Larson called recess for lunch at 11:46 a.m.**

*Off Record at 11:46 a.m.*

*On Record at 1:10 p.m.*

**Agenda Item 10**

**Old Business**

**Time: 1:10 p.m.**

*Debbie Ryan, CEO, Alaska Chiropractic Society, Joined the meeting at 1:10 p.m.*

*Sheri Ryan, COO, Alaska Chiropractic Society, joined the meeting at 1:10 p.m.*

### GEICO

Debbie Ryan and Sheri Ryan, from the Alaska Chiropractic Society, showed up prior to the ACS update to speak with the board concerning the GEICO Med Pay issue. As a reminder, the GEICO Med Pay issue is a policy with limitations on medical payments (Med Pay), which is \$2500, to patients who are seen, in any aspect, by a chiropractor, including referrals to outside care. Sheri informed the board that ACS has spoken to the Division of Insurance and that Med Pay is considered property/casual insurance and is exempt from discrimination statutes, in Alaska, that you cannot treat group health insurance providers differently. Sheri notified the board that ACS is looking to speak with attorneys to see if there is any legal or legislative remedy to deal with the Med Pay policy. Both the board and ACS feels there is growing concern that this issue will be the first of many to come, and that other insurance companies will create similar policies. The board is concerned that public safety is at risk because this policy hinders a chiropractor's ability to be able to refer a patient to the appropriate person, which could also lead to malpractice. The board suggested that chiropractors would need to inform patients that if they were to refer them to another provider, their coverage would most likely exceed the \$2500 limit, and that their insurance would not cover needed services. The board and ACS believe that the Med Pay policy creates barriers for patients to make financial decisions and puts chiropractors in a position of malpractice. ACS informed the board that they will work with litigation and get back to the board on what their next course of action will be. With nothing left to talk about regarding the GEICO Med Pay policy, the board began the ACS Update.

Dr. Vito asked Sheri Ryan and Debbie Ryan to share their ACS updates with the board. Sheri informed the board that SB 204, regarding an issue that chiropractors are no longer allowed to issue disability parking permits, had passed the House and went back to the Senate and was approved unanimously. It is now awaiting transition to the governor for his signature, and will, at the earliest, be finished during the 4<sup>th</sup> quarter of the year, to allow chiropractors to issue disability parking permits.

Debbie shared with the board ACS's concern that chiropractors are not listed in areas that they should be, in statute, and that it is creating problems for the chiropractic profession. Debbie asked if the board could help with this issue. Dr. Larson informed her that the board cannot set forth statutory legislation, but that they have the ability to direct and produce regulation based upon statutory authority. Debbie asked the board if they wanted ACS to try and find the areas in statute that should include chiropractors. The board politely accepted ACS's offer.

Sheri presented a legislative initiative that ACS has that would create a type of conservative care, in regards to the opioid epidemic that surrounds the chiropractic profession, as well as the state of Alaska. She suggested that ACS's legislative committee wants to create something similar to West Virginia's Senate Bill 273, which highly suggests conservative care before being prescribed opioids. SB 273 also makes it so that before an opioid can be prescribed, for chronic pain, the patient has to go for conservative care. Also, anybody who sells insurance in West Virginia has to cover the costs of conservative care, under their policy, for a minimum of 20 visits per episode, and copays cannot be more than what would be considered for a primary care visit. Dr. Larson suggested Sheri contact Sherry McAllister, so she could possibly give her presentation on the opioid crisis to ACS, or even give the presentation at the ACS convention later in the year.

Sheri informed the board that ACS has a representative that is seated on the Medical Services Review Committee of the Alaska Workers' Compensation Board. The MSRC is tasked to revise the fee schedule. Dr. William Pfeifer is ACS's representative but has scheduling conflicts and cannot attend the four meetings scheduled this summer. Because of this conflict, Sheri asked the board if there was anybody who was willing to be their representative during the four scheduled meetings. Dr. Morris showed interest in filling the position if he could attend all of the meetings via teleconference.

Sheri updated the board on ACS's partnership with an independent physician association (IPA), SecureCare of Alaska. She said that ACS partnered with SecureCare of Alaska because they could see, based on what was happening in other states, how things were going to start infringing upon insurance and chiropractors in Alaska. She acknowledged that only chiropractors in Alaska are eligible to be a part of SecureCare of Alaska, and that chiropractors who join will have the ability to independently decide whether or not they are going to accept a group contract or not. Sheri informed the board that ACS is having a town hall meeting May 30, 2018 at Admiral's Place, and will also be livestreaming the event, to provide an overview of SecureCare of Alaska.

Lastly, Sheri reminded that board of the upcoming ACS 2018 Convention that will take place October 4<sup>th</sup>-7<sup>th</sup>, 2018. They asked if the board wanted to conduct their next board meeting at the convention, and that ACS would provide a room for the board meeting. The board informed both Sheri and Debbie that they would talk about it when they set meeting dates at the end of the current board meeting.

*Jasmin Bautista, Investigator, joined the meeting at 2:00 p.m.*



goal is to break even every year, and that their fees would decrease to get the surplus closer to breaking even.

Ms. Dumas began conversation about the chiropractor's fee analysis for Fiscal Year 2018. She informed the board that if they do not change the fees they will have two years' worth of surplus in the near future. She said that the Division is proposing that the license fees be reduced to correct the surplus. The board suggested no changes to the license fees at this time because they were most likely going to need the surplus to pay for legal matters. Ms. Dumas informed them that they could make a motion to propose no changes to the license fees, but that ultimately it is up to the Director, Janey McCullough. With nothing left to speak to the board about Ms. Dumas left the meeting.

*Melissa Dumas, Administrative Officer, left the meeting at 2:41 p.m.*

The board decided to propose no changes to their license fees, citing the need for revenue in regards to the open cases that are with investigations.

**On a motion duly made by Jonathan vito, seconded by Jeffrey Reinhardt, and approved unanimously without any objections, it was**

**RESOLVED to propose no changes to the chiropractic license fees, which is against the proposed change from the Division.**

**Dr. Larson called for a break at 2:45 p.m.**

*Off Record at 2:45*

*On Record at 2:49*

**Agenda Item 14**

**New Business**

**Time: 2:49 p.m.**

**Naturopaths**

The board continued their conversation on naturopaths. After a thorough conversation regarding naturopaths, and what is happening to their profession, the board decided to monitor the situation going forward.

**Advanced Chiropractic Practice**

Dr. Larson brought up the topic of advanced chiropractic practice. Dr. Vito informed the board that he wanted to bring this topic up for discussion because chiropractors are a portal of entry to patients, have the training, and should be able, to diagnose and prescribe certain medications without a patient having to go to their primary medical doctor. The board provided examples of situations where chiropractic patients are required to see their primary medical doctor in order to receive the care they need, but that a lot of the times they are on a wait list and cannot receive the proper care at the correct time. After an extensive discussion on what the board thought chiropractors should be able to diagnose and treat, the board discussed the possibility of adding a diplomate that would allow certain advanced chiropractic practice. It was decided that if board members wanted to do their own research, to get their own opinions on the subject, the board could continue discussion on the topic at the next board meeting.



Dr. Campbell's Letter to the Board

Mr. Bay began conversation on a letter that the board's prior Chairman, Dr. Walter Campbell, wrote to the board. The board agreed that the letter was very well written, and that Mr. Bay look into archiving it.

**TASK:**

**Mr. Bay will find out the process of archiving Dr. Campbell's letter.**

Aetna Denials for "Not Medically Necessary"

Dr. Larson addressed an inquiry from a chiropractor, Dr. Steven Messerschmidt, in regards to Aetna denials for claims that are deemed "not medically necessary." Mr. Bay paused this discussion momentarily, and informed the board that it was time for public comment.

Public Comment

Time: 3:30 p.m.

There was no one present from the public. Mr. Bay closed public comment and continued on the prior topic, Aetna denials.

Aetna Denials for "Not Medically Necessary"

Dr. Vito informed Mr. Bay that Aetna will deny a claim and deem it "not medically necessary," but will not provide a reason as to why it has been denied. Dr. Larson provided Mr. Bay with a brief explanation on the process of insurance and coding practices. The board acknowledged that the chiropractor who is having the Aetna issues is most likely not up to date on billing practices. The board decided to have Dr. Reinhardt, and if need be, Dr. Larson, speak with Dr. Messerschmidt.

**On a motion duly made by Jonathan vito, seconded by John Wayne Aderhold, and approved unanimously without any objections, it was**

**RESOLVED to have Dr. Steven Messerschmidt be allowed to speak to Dr. Reinhardt, and Dr. Larson if need be, regarding the Aetna denials for "not medically necessary."**

Acceptable CE Courses

Dr. Vito started discussion on an inquiry from a Dr. Richard Saporito, in regards to acceptable topics for continuing education. Dr. Saporito asked the board if the topics of opioid management and medical marijuana were acceptable for courses in continuing education. The board discussed Dr. Saporito's inquiry, and came to the decision that there is not enough information to come to a decision on the topics discussed. The board decided to have Mr. Bay contact Dr. Saporito and inform him that he would need to fill out a continuing education application for course approval, so the board has detailed course content to look over when deciding if the course is approvable.

**TASK:**

**Mr. Bay will contact Dr. Richard Saporito and inform him of the board's decision to have him fill out and turn in a continuing education application for course approval.**

