FOR	DIVIS	NOL	LISE	ONLY

## **Board of Chiropractic Examiners**

PO Box 110806, Juneau, AK 99811

Phone: (907) 465-2550

Chiropractic Physician License Renewal	
Email: BoardOfChiropracticExaminers@Alaska.Gov Website: ProfessionalLicense.Alaska.Gov/BoardOfChiropracticExaminers	

## January 1, 2023 - December 31, 2024

- Your license lapses after December 31, 2022. There is no grace period it is illegal to work if your license has lapsed.
- Emailed applications will not be accepted.

PART | Payment of Fees

- Make checks and money orders payable to the State of Alaska or use the attached credit card payment form.
- Plan on a 4–6-week processing time for correct and complete renewal applications.
- Once the renewal is processed, your license certificate will be available for printing via the MY LICENSE self-service portal.

Renewal Fees:	Full-Term Biennial License Renewal (For licenses first issued on or before	December 31, 2	2021)		\$600.00
(Active License)	Prorated License Renewal (For licenses first issued on or after Jo	 inuary 1, 2022)			\$300.00
Renewal Fees: (Inactive License)	May not practice in Alaska.				\$150.00
Renewal Fees: (Retired)	May not practice in Alaska.				\$150.00
Renewal Fees: (Late Renewal)	☐ Delayed Renewal Penalty  (For renewals postmarked on or after	March 2, 2023	3)		\$100.00
PART II Personal Information					
Full Legal Name: Name change:			AK Chiropr License Nu	actic Physician mber:	
If you have had a legal name change since your last license was issued, you must complete a <u>Change of Name</u> form.					
Mailing Address: Address change:	P.O. Box or Street	City		State	Zip
Contact Phone:				Date of Birth:	
<b>EMAIL AGREEMENT:</b> By choosing to receive correspondence on any matter affecting my license or other business with the Alaska Division of Corporations, Business and Professional Licensing, I agree to maintain an accurate email address through the MY LICENSE web page. I understand that failure to check my email account or to keep the email address in good standing may result in an inability to receive crucial information, potentially resulting in my inability to obtain or maintain licensure.					
Email Address:			Select One	: =	rrespondence Electronically rrespondence by Mail
Note: If both boxes are selected above, you will receive correspondence electronically.					
States Social Security Numb	: AS 08.01.100 requires you to provide your United er. It is considered confidential information and will may be used to verify inter-state licensure.				

## **PART III** Professional Fitness Questions

The following questions must be answered. "Yes" answers may not automatically result in license denial.

For each "yes" response to any question, you must provide an <u>explanation</u> and <u>documentation</u>. Use the letter of explanation form (#08-4752) appended to this application; include full details, dates, locations, type of action, organizations or parties involved, and specific circumstances. A separate letter of explanation form must be provided for each "yes" answer documented below. Documentation includes copies of court orders, charging documents, board, or license actions, etc.

The contents of licensing files are generally considered public records. If you believe that the additional information you are attaching to explain a "yes" answer should be considered confidential, state that in the attachment. A request for confidentiality may or may not be granted.

	When in doubt, disclose and explain.	
Sin	ce the date your last Alaska license was issued or renewed:	
1.	Have you had a professional license denied, revoked, suspended, or otherwise restricted, conditioned, or limited or have you surrendered a professional license, been fined, placed on probation, reprimanded, disciplined, or entered into a settlement with a licensing authority in connection with a professional license you have held in any jurisdiction including Alaska and including that of any military authorities or is any such action pending?	☐ Yes ☐ No
2.	Have you been convicted of a crime or are you currently charged with committing a crime? For purposes of this question, crime includes a misdemeanor, felony, or a military offense, including, but not limited to, driving under the influence (DUI) or driving while intoxicated (DWI), driving without a license, reckless driving, or driving with a suspended or revoked license. Convicted includes having been found guilty by verdict of a judge or jury, having entered a plea of guilty, nolo contendere or no contest, or having been given probation, a suspended imposition of sentence, or a fine.	☐ Yes ☐ No
3.	Have you been the subject of an investigation by any licensing jurisdiction or are you currently under investigation by any licensing jurisdiction, or is any such action pending?	☐ Yes ☐ No
4.	Have you experienced or been treated for bipolar disorder, schizophrenia, paranoia, a psychotic disorder, substance abuse, or any other mental or emotional illness which may impair or interfere with your ability to safely practice as a chiropractic physician?	☐ Yes ☐ No
5.	Have you been treated for substance abuse, or have you been addicted to, or excessively or illegally used, alcohol or a controlled substance which may impair or interfere with your ability to practice as a chiropractic physician?	☐ Yes ☐ No
6.	Have you experienced a physical disability, impairment, or an infectious or contagious disease that may interfere with your ability to safely practice as a chiropractic physician?	☐ Yes ☐ No
	"Yes" Answers  If answered "yes" to questions 4, 5, or 6, in addition to your personal stat submit a statement from your health care provider indicating your ability to sa chiropractor. Applications submitted without the appropriate attachments wincomplete and will not be processed.	afely practice as a

#### PART IV Statement of Compliance

Continuing education programs must be approved by the board per 12 AAC 16.320. By checking the appropriate box below, you are verifying your compliance with the continuing education requirements of 12 AAC 16.320 during the license period from January 1, 2021, through December 31, 2022. Renewal for licenses issued before December 31, 2020. I have completed at least 32 hours of approved continuing education; at least 8 hours must be devoted to radiographic safety, techniques and interpreting, or diagnostic imaging; 2 hours must be devoted to coding and documentation, 2 hours must be devoted to ethics and boundaries, and 2 hours (but no more than 4 total) must be devoted to CPR training. No more than 16 hours of the above may be earned via distance or internet learning. - or -Renewal for licenses issued between January 1, 2021 and December 31, 2021. I have completed at least 16 hours of approved continuing education between January 1, 2021 and December 31, 2021; at least 8 hours must be devoted to radiographic safety, techniques and interpreting, or diagnostic imaging; 2 hours must be devoted to coding and documentation; 2 hours must be devoted to ethics and boundaries and 2 hours must be devoted to CPR training. - or -Renewal for licenses issued on or after January 1, 2022. I am not required to document continuing education for this renewal only. - or -Request for Exemption from Continuing Education I have received board-approval for exemption of continuing education in accordance with 12 AAC 16.390(d). If you have not received board-approval, you must submit a written request prior to submitting your renewal application. The written request must include a statement explaining the reasonable cause or excusable neglect. In order to qualify for renewal, programs must be approved by the board. In accordance with 12 AAC 16.320, to be approved by the board, a subject must contribute directly to the professional competency of a person licensed to practice as a chiropractor and be directly related to the **Continuing Education** concepts of chiropractic principles, philosophy, and practice. The list of approved continuing education courses, along with their approved numbers, is available on our web site: ProfessionalLicense.Alaska.Gov/BoardofChiropracticExaminers

Random Audit

The board will audit a percentage of the license renewals. If your license is randomly selected for audit, you will be sent a letter and required to submit documentation and proof that you satisfied the continued competency requirements as you stated on this renewal form. Save your documents for at least four years to respond to any audits.



FOR DIVISION USE ONLY

## **Board of Chiropractic Examiners**

PO Box 110806, Juneau, AK 99811

Phone: (907) 465-2550

Email: BoardOfChiropracticExaminers@Alaska.Gov Website: ProfessionalLicense.Alaska.Gov/BoardOfChiropracticExaminers	
Signature Page	
Applicant Name:	
PART V Agreement	
I hereby certify that I am the person herein named and subscribing to this application and that and I know the full content thereof. I declare that all of the information contained herein submitted herewith are true and correct.	
I understand that any falsification or misrepresentation of any item or response in this appli falsification or misrepresentation of documents to support this application, is sufficient ground disciplining a license, certificate, or permit to practice in the state of Alaska.	
I further understand that it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify of unsworn falsification.	an application and commit the crime

**Applicant Signature:** 

Date Signed:

## **General Information**

#### APPLICATION PROCESSING:

The average time to process a paper application varies by program but can take several weeks from the date it is received in this office complete with all correct forms, supporting documents and appropriate fees paid. When the application is complete and correct, and all supporting documents have been received and all fees have been paid, the license will be issued. Start the process far enough in advance to allow for processing time. Applications are reviewed in order of receipt in our office, and walk-in customers should not expect immediate review.

#### LICENSE TERM:

There is no "inactive" status. If you choose not to renew your license, it will lapse. Licenses are issued for a two-year period and expire on December 31 of even-numbered years, regardless of the date of issuance, except licenses issued within 90 days of the expiration date are issued to the next biennial expiration date. One renewal notice will be mailed at least 30 days before license expiration to the last known address of record.

#### **PROFESSIONAL FITNESS QUESTIONS:**

A "yes" response in the application does not mean your application will be denied. If you have responded "yes" to any professional fitness questions in the application, be sure to submit a signed and dated explanation, and the charging document and judgement.

#### **RANDOM AUDIT:**

If your program requires continuing education, the Division will audit a percentage of the license renewals. If your license is randomly selected for audit, a letter will be sent with instructions to submit documentation as proof you satisfied the continuing competency requirements as stated on this renewal form. Licensees are randomly selected by computer and may be randomly selected as often as the computer program chooses. You must save your documents for at least four years so you can respond to audits.

#### ADDRESS OR NAME CHANGE:

In accordance with 12 AAC 02.900, it is the applicant's/licensee's responsibility to notify the Division, in writing, of changes of address or name. Name and address change notification forms are available on the Division's website. The address of record with the division will be used to send renewals and all other official notifications and correspondence. The name appearing on the license must be your current legal name.

### **SOCIAL SECURITY NUMBERS:**

AS 08.01.060 and 08.01.100 require that a U.S. Social Security Number be on file with the division before a professional license is issued or renewed for an individual. If you do not have a U.S. Social Security Number, please complete the Request for Exemption from Social Security Number Requirement form (#08-4372) located at *ProfessionalLicense.Alaska.Gov* or contact the division for a copy of the form. This form is required with every application if you do not have a U.S. Social Security Number.

#### **PUBLIC INFORMATION:**

Please be aware that all information on the application form will be available to the public, unless required to be kept confidential by state or federal law. Information about current licensees, including mailing addresses, is available on the division's website at *ProfessionalLicense.Alaska.Gov* under License Search.

#### **ABANDONED APPLICATIONS:**

Under 12 AAC 02.910, an application is considered abandoned when 12 months have elapsed since correspondence was last received from or on behalf of the applicant. An abandoned application is denied without prejudice. At the time of abandonment, the division will send notification to the last known address of the applicant, who has 30 days to submit a written request for a refund of biennial license and other fees paid. The application fee will not be refunded. If no request for refund is received within that timeframe, no refund will be issued, and all fees will be forfeited.

#### **PAYMENT OF CHILD SUPPORT:**

If the Alaska Child Support Enforcement Division has determined that you are in arrears on child support, you may be issued a nonrenewable temporary license valid for 150 days. Contact Child Support Services at (907) 269-6900 to resolve payment issues.

#### PRESCRIPTION DRUG MONITORING PROGRAM:

All actively licensed practitioners with a DEA registration number valid to use in any state or practice location must register with the Alaska Prescription Drug Monitoring Program (PDMP) within 30 days of initial licensure and use the PDMP to review a patient's prescription history each time before prescribing, administering, or dispensing a federally scheduled II or III controlled substance. Providers must also review the patient's history once every 30 days for up to 90 days, and at least once every three months if treatment continues for more than 90 days. For more information, please visit *PDMP.Alaska.Gov* 

#### **STATUTES AND REGULATIONS:**

The complete set of statutes and regulations for this program are available by written request or online at the division's website: ProfessionalLicense.Alaska.Gov

If you would like to receive notice of all proposed regulation changes for your program, please send a request in writing with your name, preferred contact method (mail or email), and the specific program you want to be updated on to the address below.

Regulations Specialist

Department of Commerce, Community, and Economic Development

Division of Corporations, Business and Professional Licensing

EMAIL: RegulationsAndPublicComment@Alaska.Gov

- **12 AAC 16.280. STATEMENT OF PURPOSE OF CONTINUING EDUCATION.** The purpose of continuing chiropractic education is to insure that the renewal of licenses is contingent upon proof of continued competency and to assure the consumer of an optimum quality of chiropractic health care by requiring licensed chiropractors to pursue education designed to advance their professional skills and knowledge.
- **12 AAC 16.290. HOURS OF CONTINUING EDUCATION REQUIRED.** (a) Except as provided in (b) of this section, an applicant for renewal of a chiropractic license must obtain and document successful completion of the following:
- (1) for an applicant who files a complete renewal application with the department for a license period that concludes on or before December 31, 2012, 24 credit hours of approved continuing education during the concluding licensing period; at least one-third and no more than one-half of the total hours required under this paragraph must be devoted to
  - (A) radiographic safety;
  - (B) radiographic techniques and interpretation; or
  - (C) diagnostic imaging;
- (2) for an applicant who files a complete renewal application with the department for a license period that concludes after January 1, 2013, 32 credit hours of approved continuing education during the concluding licensing period, as follows:
  - (A) eight hours of the total hours required under this paragraph must be devoted to
    - (i) radiographic safety;
    - (ii) radiographic techniques and interpretation; or
    - (iii) diagnostic imaging;
  - (B) two hours of the total hours required under this paragraph must be devoted to coding and documentation;
  - (C) two hours of the total hours required under this paragraph must be devoted to ethics and boundaries;
- (D) two hours of the total hours required under this paragraph must be devoted to cardiopulmonary resuscitation (CPR) training.
- (b) An applicant for renewal of a chiropractic license for the first time must obtain and document successful completion of the following:
- (1) for a license period that concludes on or before December 31, 2012, 12 credit hours of approved continuing education for each complete calendar year the applicant was licensed during the concluding licensing period;
- (2) for a license period that concludes after January 1, 2013, 16 credit hours of approved continuing education for each complete calendar year the applicant was licensed during the concluding licensing period.
- (c) Two of the hours required under (a) of this section will be credited to each applicant for renewal for completing the jurisprudence review prepared by the board, covering the provisions of AS 08.20 and this chapter. An applicant for renewal must verify, in an affidavit, that the applicant has complied with this subsection before the applicant's license renewal will be processed.
- (d) An applicant for renewal of a license to practice chiropractic must submit, on a form provided by the department, a sworn statement of the continuing education that the applicant completed during the concluding licensing period. The statement must include the following information:
  - (1) the sponsoring organization;
  - (2) the title and description of the course;
  - (3) the dates of attendance or period of correspondence;
  - (4) the number of continuing education hours claimed;
  - (5) the course approval number issued by the department.
  - (e) An applicant for renewal of a chiropractic license may receive up to four hours of the credit
    - (1) required under (a)(1) of this section from one or more of the following subject areas:
      - (A) cardiopulmonary resuscitation training (CPR);
      - (B) automated external defibrillator training (AED);
      - (C) basic life support training (BLS);
    - (2) required under (a)(2) of this section from one or more of the following subject areas:
      - (A) automated external defibrillator training (AED);
      - (B) basic life support training (BLS).
- (f) No more than 16 credit hours of the credit hours required under (a)(2) of this section for a renewal of a chiropractic license may be obtained over the Internet or by distance learning.
- **12 AAC 16.300. COMPUTATION OF NONACADEMIC CONTINUING EDUCATION HOURS.** (a) For the purposes of 12 AAC 16.280 12 AAC 16.390, 50 minutes of instruction constitutes one hour.
  - (b) Credit is given only for class hours and not for hours devoted to class preparation.

- **12 AAC 16.310. COMPUTATION OF ACADEMIC CREDIT CONTINUING EDUCATION HOURS.** (a) One quarter hour academic credit from a college or university constitutes 10 hours of continuing education.
  - (b) One semester hour academic credit from a college or university constitutes 15 hours of continuing education.
  - (c) Challenged courses are not acceptable for continuing education credit.
- **12 AAC 16.320. APPROVED SUBJECTS.** To be approved by the board, a subject must contribute directly to the professional competency of a person licensed to practice as a chiropractor and be directly related to the concepts of chiropractic principles, philosophy, and practice, including the following:
  - (1) treatment and adjustment technique, including physiotherapy, nutrition and dietetics;
  - (2) examination and diagnosis or analysis including physical, laboratory, orthopedic, neurological and differential;
  - (3) radiographic technique and interpretation involving all phases of roentgenology as permitted by law;
  - (4) study of the methods employed in the prevention of excessive radiation and safety precautions to the patient; and
  - (5) diagnostic imaging.
- **12 AAC 16.330. NONACADEMIC PROGRAM CRITERIA.** (a) Nonacademic continuing education programs requiring class attendance are approved by the board if
  - (1) the program is at least one hour in length;
  - (2) the program is conducted by a qualified instructor;
  - (3) a record of registration or attendance is maintained; and
  - (4) an examination or other method of assuring satisfactory completion of program by participant is incorporated.
- (b) A qualified instructor or discussion leader is anyone whose background, training, education or experience makes it appropriate for the person to lead a discussion on the subject matter of the particular program.
- **12 AAC 16.340. APPROVED NONACADEMIC CONTINUING EDUCATION PROGRAMS.** (a) The following programs are approved by the board:
- (1) educational meetings of the following associations, if the documentation required by 12 AAC 16.290 demonstrates that the meeting in question meets the requirements of 12 AAC 16.320 and 12 AAC 16.330.
  - (A) American Chiropractic Association;
  - (B) International Chiropractors Association;
  - (C) Canadian Chiropractic Association;
  - (2) educational classes, if
- (A) they are conducted by any chiropractic college that is accredited by or has accreditation status with the Council on Chiropractic Education; and
  - (B) the program sponsor or the applicant for renewal of a chiropractic license
- (i) requests board approval; and
- (ii) demonstrates to the board's satisfaction that the educational classes meet the requirements of 12 AAC 16.320 and 12 AAC 16.330
- (3) continuing education programs that are certified by the Providers of Approved Continuing Education through the Federation of Chiropractic Licensing Boards.
  - (b) The board may approve other continuing education programs under 12 AAC 16.345.
  - (c) Repealed 1/29/2009.
- 12 AAC 16.345. APPLICATION FOR CONTINUING EDUCATION COURSE APPROVAL. (a) Except as provided in 12 AAC 16.340(a), to be approved by the board to meet the continuing education requirements of 12 AAC 16.290, 12 AAC 16.320, and 12 AAC 16.330, an applicant for continuing education course approval shall submit to the board, not less than 90 days before the date of the proposed program presentation date,
  - (1) a completed application on a form provided by the department;
  - (2) the continuing education course approval fee specified in 12 AAC 02.150;
  - (3) the name of the course provider;
  - (4) a complete course description, including the course title and a description of the learning objectives;
  - (5) a course syllabus; and
  - (6) an outline of the major topics covered by the course and the number of classroom hours allowed for each topic.
  - (b) Approval of a continuing education course under this section is valid until December 31 of the next even-numbered year.
- (c) A sponsor who has a change in a condition required under (a)(3) (6) of this section during the approval period described in (b) of this section must
  - (1) reapply to the board for continuing education credit approval; and
  - (2) submit the continuing education course change approval fee specified in 12 AAC 02.150.

- (d) Notwithstanding the provisions of (a) of this section, the board may award continuing education credit for attendance at a course or seminar that has not previously been approved by the board if course or seminar meets the requirements of 12 AAC 16.320 and 12 AAC 16.330 and if the applicant submits supporting documentation to the board with the application for credit. The amount of credit awarded, if any, will be determined by the board on an individual basis.
- (e) Falsification of any written evidence submitted to the board under this section is unprofessional conduct and constitutes grounds for censure, reprimand, or license revocation or suspension.
- **12 AAC 16.350. INDIVIDUAL STUDY.** The number of hours of continuing education credit awarded for completion of a formal correspondence or other individual study program that requires registration and provides evidence of satisfactory completion will be determined by the board on an individual basis. A request for board approval for credit of hours of continuing education for an individual study program must be made to the board in writing before the applicant begins the individual study program.
- **12 AAC 16.360. INSTRUCTOR OR DISCUSSION LEADER.** (a) One hour of continuing education credit is awarded for each hour completed in preparation for instruction or discussion as an instructor or discussion leader of educational programs meeting the requirements of 12 AAC 16.280—12 AAC 16.390. The number of hours of credit so awarded may not exceed twice the number of hours awarded under (b) of this section.
- (b) One hour of continuing education credit is awarded for each hour completed as an instructor or discussion leader of educational programs meeting the requirements of 12 AAC 16.280—12 AAC 16.390. Credit is awarded only for the initial course of instruction of the subject matter unless there have been substantial new developments in the subject since the prior presentation.
- (c) The total credit awarded under this section may not exceed one-third of the total hours of continuing education reported in any licensing period.

**12 AAC 16.370. PUBLICATIONS.** Continuing education credit may be awarded for publication of articles or books. The amount of credit so awarded will be determined by the board on an individual basis.



# THE STATE of ALASKA

Department of Commerce, Community, and Economic Development Division of Corporations, Business and Professional Licensing

#### **Professional Licensing**

PO Box 110806, Juneau AK 99811
Phone: (907) 465-2550
Email: License@Alaska.Gov
Website: ProfessionalLicense.Alaska.Gov

## Letter of Explanation for a Professional Fitness "Yes" Answer

Use this form only to explain and document any professional fitness "Yes" answers. A "Yes" answer is not necessarily disqualifying but concealing one may be.

Each "Yes" answer requires a separate explanation and associated documentation. Submit all relevant documentation with this form, even if you have previously provided it.

- **Explanations** include full details, dates, locations, type of action, organizations or parties involved, and specific circumstances. If the space provided is insufficient, make additional copies as needed.
- **Documentation** includes copies of court orders, charging documents, board or license actions, decisions against your professional certification, satisfaction of consent agreements (fines paid, community service completed, off probation, etc.), and fitness to practice letters (statement from your provider that you are safe to practice if you check "Yes" to any of the questions regarding mental or physical health, or drug or alcohol abuse or addiction).
- **Disciplinary actions** may include but not be limited to: suspension, surrender, revocation, probation, academic probation, reprimand, censure, restricted license, limited license, conditioned license, or letters of counseling, concern, advice, warning, caution, admonishment, or reprimand.

If you have multiple "Yes" answers or multiple incidents for any professional fitness question, you must use a separate copy of this form and provide a full explanation and documentation for each incident.

The contents of licensing files are public records. If you believe that the additional information you are attaching to explain a "Yes" answer should be considered confidential, state that in the attachment. A request for confidentiality may or may not be granted according to state law.

according to state ia	vv.				
Write the professional fitness question number you are answering "Yes" to in the box.					
Location of Inciden	t:			Date of Incident:	
Explanation of Inci	dent:				
When in doul and exp Make copies a	olain.				
Did you attach al	l applicable docu	ments associated with this in	cident?		
☐ Court order	s $\square$	Consent agreements	☐ Disciplinary a	actions	Charging documents
☐ Court recor	ds 🔲	Fitness to practice	☐ All other doc	umentation related t	to this incident
I have additional incidents for this "Yes" answer, or "Yes" answers to other Professional Fitness questions and have attached a separate copy of this form for each incident.					
Full Name:				PL Code:	
Signature:				Date:	

You must submit one form for each "Yes" answer. Make copies of this form as necessary.

FOR DIVISION USE ONLY

State of Alaska Department of Commerce, Community, and Economic Development Division of Corporations, Business and Professional Licensing PO Box 110806, Juneau, AK 99811 Phone: (907) 465-2550

Credit Card Payment Form	Credit	Card	<b>Paymen</b>	t Form
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Credit Card P	ayment Form		
	s are accepted. For s ard payment form with	security purposes, <u>do not email</u> credit card in hyour application.	nformation.
Name of Applicant o	or Licensee:		
Program Type:		License Number (if applicable): _	
I wish to make paym	nent by credit card fo	r the following (check all that apply):	AMOUNT
☐ Application F	ee:		
License or Re	enewal Fee:		
Other (name	change, wall certifica	ate, fine, duplicate license, exam, etc.):	
1		······	
2			
		TOTAL:	
Name (as shown on	credit card):		
Mailing Address: _			
Phone Number:		Email <i>(optional)</i> :	
Signature of Credit	Card Holder:		
	Rev 12/26/18	, ,	
CREDIT CARD II	NFO: Your paymen	t cannot be processed unless all fields a	re completed!
1. Account Nun			ır fields <b>MUST</b> completed!
2. Expiration Da			section will be
3. Billing ZIP Co			oyed after the