

We Get Letters & E-Mail

"... chiropractors are trained to make differential diagnoses..."

I am a chiropractic physician in Tennessee, and a 2000 graduate from Cleveland Chiropractic College. I am delighted that veterans are finally going to have access and coverage to the chiropractic care they have long deserved.

However, I was bothered by the statement of Veterans Administration Chiropractic Oversight Committee member Warren Jones, MD: "Chiropractors are not trained to make differential diagnosis like a primary care physician. Physicians will refer to chiropractors for low back pain if warranted."

First, today's graduating chiropractors are trained to make differential diagnoses like a primary care physician. We are trained and board-tested in systems diagnoses of any body system and in referral to the appropriate specialist as needed (National Board of Chiropractic Examiners, Part III). Second, the chiropractic physician is recognized as a primary health care physician in most states, including Tennessee. Third, the chiropractor is not a back specialist, nor a headache specialist, nor *any* specialist, but rather a full-service health physician who can identify health problems, and uses the chiropractic adjustment as the primary tool (instead of drugs or surgery) to restore health by finding and removing interference to the nervous system.

In chiropractic college, we learn what all other physicians do and can intelligently refer patients to the proper physician or to the emergency room as appropriate. I wish that MDs and DOs were also trained in intelligent referral to the appropriate physician, including to the chiropractic physician, knowing what we do and when to refer patients to us. It is time for ignorance to be replaced with solid information.

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"Random Audits for CE Credit"

Dear Editor,

This letter is a warning for all California DCs. I teach continuing education seminars presubmitted and pre-approved for the full 12 hours in California and other western states. I have been seeing a growing trend in problems DCs have who attend seminars, both mine and other presenters I know. It's called "Random Audits for CE Credit."

The California Board of Chiropractic Examiners is sending letters out randomly to doctors licensed in California asking them to send, within 10 days, copies of their certificates of attendance at approved CE seminars for the last three years. Most doctors have little problem finding and sending such copies within the 10 days. A few have had problems, like lost certificates, destroyed in a fire, the dog ate it or they didn't have a chance to actually attend one of those years. That's

when the problems start.

California law states that a doctor may have his license on inactive status for any year and is not required to take CE classes during that time, but when activation is desired, proof of attendance (at 12 hours for each year the license was on inactive status) must be provided before a current active license may be granted.

Doctors who can't show the three most recent years of certificates are told to contact not the presenter or instructor of the course, but the sponsor to get a copy certificate. That is if the sponsor hasn't moved, closed up operation or packed things away for long-term storage. An example is how PCCW moved its sponsorship operation back to Davenport by boxing everything up and shipping it there. One doctor had 10 days to get a copy of his certificate and was told by PCC that everything was still in boxes somewhere and it would take some time to find it. One doctor lost one certificate in a fire, had to have the insurance company prove her fire loss, and then was given 30 days to get a copy of the certificate - but she still had to get it.

If [a certificate] can't be produced, the position of the board varies. It can be lenient and tell the DCs to quickly make up the 12 hours now, and they will get a slap on the wrist. The board has the power to issue fines for such infractions now, so there may be money involved. It can be strongly committed to stopping abuse of nonattendance and explain that the law prohibits a DC from practicing chiropractic without an active license, which means that during the year their license was considered inactive, it was illegal to receive any money for services rendered - so the DC is required to pay back any and all monies received that year, and can even be told to compensate all monies paid out due to the DC's actions, like disability compensation for injured workers. The worst case is to just plain revoke the doctor's license.

Why is the board doing this? Because it can count. There are about 13,000 active, licensed DCs in California. Since each one has to take a CE course before the end of his or her birth month, the numbers are large enough to statistically show that approximately 1,100 DCs each month should be attending CE courses. As each DC attends a course, the name, license number and hours completed are sent by the sponsor to the SBCE.

I'm not privy to the numbers listed each month, but I can crunch numbers. About 45 "full-service" seminars meet three requirements most CA doctors want: 1) they are pre-approved; 2) they provide the full 12 hours; and 3) they are offered inside California. If the assumption is that 80 percent of the DCs wait until the last month or two before their deadline to take a class, want to stay in California for a class, and want to take all 12 hours in one weekend, that would equate to about 870 doctors per month, or about 20 doctors per each of those "full-service" seminars. Having checked several times with other "full-service" presenters who teach about 35 percent of those seminars, I find that the average is closer to about 12 per seminar. That means that about 680 are attending the other 30 "full-service" seminars or they are averaging about 23 doctors per seminar. This isn't a reasonable assumption when the other 35 percent are only getting about 12 attendees per seminar. It is more reasonable to assume they have the same average attendance, which would indicate that about 450 doctors aren't taking a CE seminar, but are checking the box saying they did and sending in their renewal checks. Let's assume that only 70 percent are looking for that last-minute, "full-service" seminar. The final number becomes about 150 per month, or 1,800 doctors per year in jeopardy [in California].

A good source at the board has stated that about three percent of DCs are receiving randomly generated audit letters. Why random? It's easier than trying to search for each name on the lists they receive. Now, my question is: Is that three percent per month or about 36 percent of all the DCs per year (about 390 per month or 4,680 per year) or three percent per year (about 33 per

month or 390 per year)? The cost for the first would be about \$390 per month versus \$33 per month. How hard is it to generate 390 identical boilerplate letters randomly from a computer database? What are your chances of getting audited? I don't know, but I'm glad I have all my certificates for the last 14 years.

Find your last three years' certificates and put them in a safe place, like a bank vault. Remember, a fire doesn't absolve you from having to produce a certificate. If you can't find them, get them now before you get your audit letter. If you didn't attend, pray really hard!

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