

CHIROPRACTIC (GENERAL)

Professional Credentialing and Board Certification: An Ethical *Faux Pas*

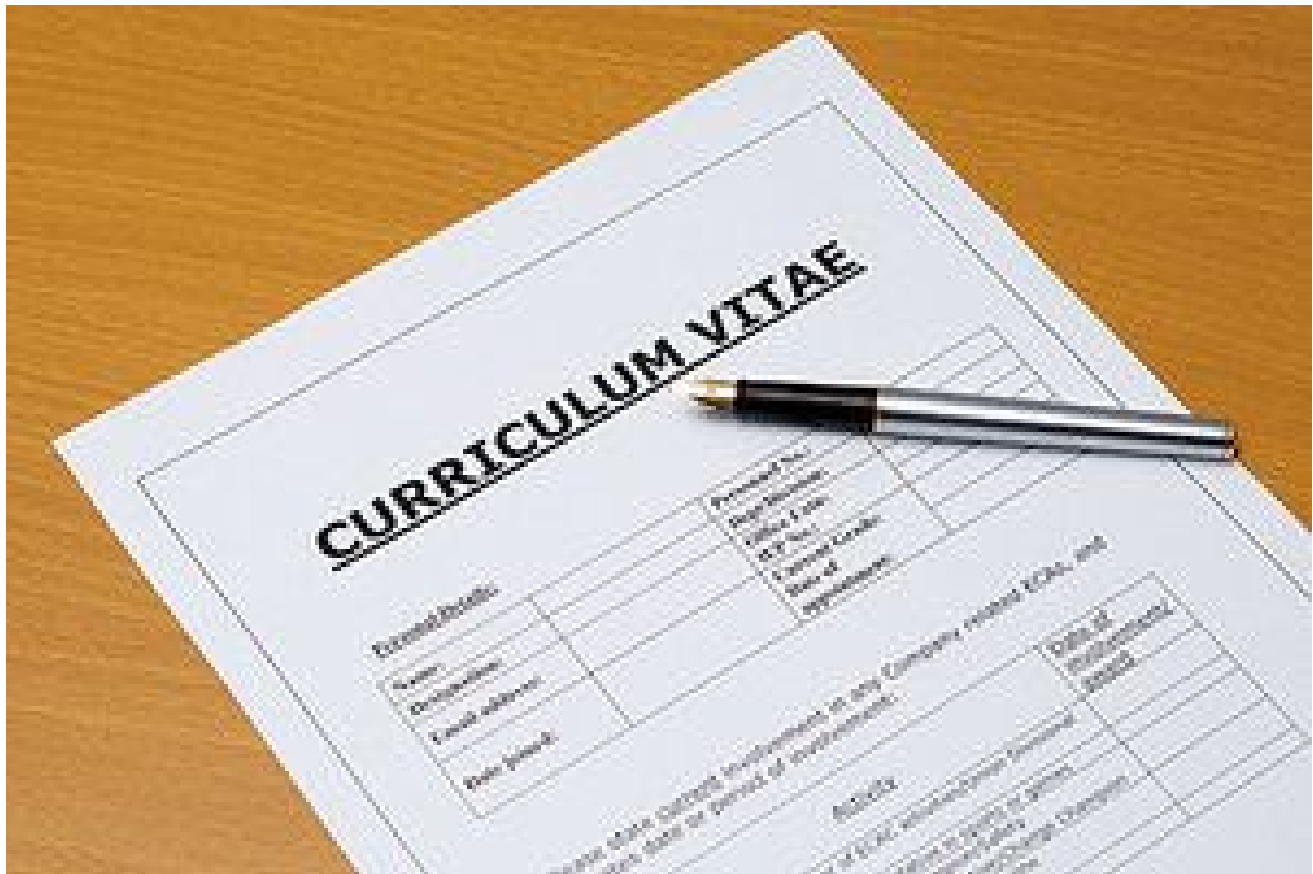
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Because of the Affordable Care Act, health care systems are [coordinating care](#) through accountable care organizations (ACOs) in order to reduce the cost of care and improve quality of care.¹ It is conceivable many of these ACOs will credential chiropractors to provide neuromusculoskeletal care for patients suffering with acute and chronic pain. Certainly chiropractors willing to integrate into ACOs and other coordinated care organizations should seek opportunities to become members of the health care team along with MD, DO, APRN, and PA providers. If you are invited to become a provider, the organization will ask you to complete a credentialing process, which will include the submission of your curriculum vitae (CV).

As the former medical director of a preferred chiropractic provider organization (IPA), I have read many curricula vitae written by chiropractors. Often, I noticed claims of board certification by the National Board of Chiropractic Examiners. Many years ago, this ethical *faux pas* was more common because of misunderstanding of the definition of *board certified*. But at this time, there is no excuse for the unethical, misleading and illegal misuse of the term. The NBCE has clarified the [proper use](#) of the term with the following statement:

"Even though the NBCE issues a certificate of attainment upon completion of Parts I, II, III and IV, use of the term 'Board Certified by the NBCE' can be considered misleading, as it may appear the doctor has a credential above another licensed doctor of chiropractic. In most states, successful completion of NBCE Parts I, II, III and IV is a prerequisite to licensure just as graduation from a chiropractic college is, but does not represent post graduate of added specialty status. Therefore, please be advised that any inappropriate use of the National Board of Chiropractic Examiners' name may result in legal action being taken against the offending party."²

What *Board Certified* Really Means



If you are currently listing "board certified" on your curriculum vitae because you attained passing grades on the NBCE examinations, you should read the entire statement by the NBCE and then remove the misleading claim. Only 3 percent of the chiropractors in America have earned the right to list *board certification* in a chiropractic specialty on their curricula vitae. I speculate that at least 10 percent of chiropractors continue to misuse the term. I am unaware of any chiropractic organization other than the NBCE that has expressed concern because of illegal use of the terms *board certified* or *diplomate*.

Board certification demonstrates that a chiropractic physician has completed postgraduate medical education, which signifies exceptional skills in specialty areas such as orthopedics, radiology and sports medicine. Chiropractors who have attained diplomate status have earned the right to use specialty credentials. These credentials indicate an advanced practice status earned through postgraduate clinical training and passing of specialty board examinations.

The American Board of Medical Specialties aptly differentiates medical licensure from board certification. While medical licensure sets the minimum competency requirements to diagnose and treat patients, it is not specialty specific. [Board certification](#) - as the Gold Star - "demonstrates a physician's exceptional expertise in a particular specialty and/or subspecialty of medical practice."³

In the past, the majority of chiropractors realized little value in the pursuit of advanced clinical training and board certification, which involved three years of seminar training and passing of specialty board examinations. Today, chiropractors are pursuing advanced practice status in order to

expand scope of practice or scope of reimbursement. Chiropractors without board certification risk being credentialed as mid-level providers by medical organizations, similar to advanced practice registered nurses (APRNs) or physician assistants (PAs).

The Power of Earned Credentials

Interestingly, APRNs and PAs have earned master's degrees and a broader scope of practice and scope of reimbursement than chiropractors. In fact, APRNs have heeded the expressed options by Lundberg and Lamm in 1993 by seeking status as primary care providers: "Allow primary care to be provided by those physicians currently in the field and ... let the remainder of care be provided by nurse practitioners, physician assistants, homeopaths, naturopaths, chiropractors, and other non-allopathic physician providers."⁴

Is it time for chiropractors with advanced practice training and credentials to pursue the suggestion by Lundberg and Lamm? Maybe the diplomates of the American Board of Chiropractic Internists (DABCI) have the credentials and exceptional skills necessary to become primary care providers.

I do know that in Connecticut, the Community Health Center Inc. (CHC) requires chiropractic providers to be board certified in a chiropractic specialty. This patient-centered medical home and federally qualified health center provides chiropractic services to patients suffering from chronic pain. As a chiropractic orthopedist, it is an honor to be a credentialed member of the CHC medical team, which is a world-class primary health care system.

The majority of non-board-certified chiropractors interested in becoming specialists will need to attend postgraduate medical education with seminar training and online / distance learning. I hope chiropractic colleges will develop chiropractic residency opportunities for future chiropractic graduates, which lead to board certification and exceptional skills in a specialized area, expanded scope of practice and reimbursement, and integration into coordinated care organizations as members of the medical team.

Chiropractors attempting to gain positions as physicians within coordinated care organizations, like other physicians, will be required to demonstrate proof of board certification in a chiropractic specialty. I suggest chiropractors not attempt to falsify credentials by claiming board certification when not earned. Medical organizations will perform due diligence and contact the NBCE, state chiropractic boards of examiners and specialty boards to verify your credentials. Maybe it is time to consider advanced clinical training and board certification in a chiropractic specialty.

Would you like to become a valuable member of a medical team and provide high-quality chiropractic services to those in need within a coordinated care organization? If yes, research specialty training and become an exceptional provider with the credentials to prove it. Please do not claim to be a diplomate without earning the credential.

References

1. "New Affordable Care Act Initiative to Support Care Coordination Nationwide." Centers for Medicare & Medicaid Services, October 2014.
2. "Diplomate Status - Why is the term 'diplomate' not used to describe NBCE certificate holders?" National Board of Chiropractic Examiners FAQ.
3. "Board Certification and Maintenance of Certification." American Board of Medical Specialties:

www.abms.org.

4. Gaspar D, Ebell M, Jacques L. "Solving the Shortage of Primary Care Physicians." *JAMA*, Dec 1993;270:380-1.

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