

## Are You Ready to Be a Primary Care Provider?

James Lehman, DC, MBA, DIANM

Recently, I have been following an American Chiropractic Association "open forum" discussion regarding the need for more primary care providers in America. The shortage of primary care physicians in America is not a recent dilemma, but a concern that has been expressed in the literature for more than 20 years.

The shortage of primary care physicians increases cost of care and reduces access to necessary medical care.<sup>1</sup> Some in the chiropractic community suggest chiropractic physicians should be trained and credentialed to provide primary care. Could chiropractic primary care physicians be a possible solution to the shortage of primary care providers?

### Primary Care Salaries

Chiropractic providers working within health care systems, such as community health centers, realize nurses may pursue advanced training and certification to become primary care providers. As the physician assistant champion at the University of Bridgeport, I understand a minority of the physician assistants pursue primary care positions, similar to medical school graduates, because of *economics*.

Specialists usually earn nearly twice the amount of a primary care physician. Hence, the shortage of primary care providers and primary care physicians creates a potential for chiropractic physicians to serve as either primary care providers or primary care physicians - and earn a reasonable salary with benefits.

According to a recently published [survey of physicians](#) conducted by Medscape, internal medicine doctors' salaries average \$243,000 annually. That's a little over half of what the highest earners, orthopedic physicians, make with an average annual salary of \$482,000. Family medicine and pediatrics earn even less than internal medicine, at \$231,000 and \$225,000 per year, respectively.<sup>2</sup>

### Providers vs. Physicians

If chiropractic physicians became certified to provide primary care, it is important to differentiate the status of a primary care provider from that of a primary care physician. The primary care provider is usually an advanced-practice registered nurse (APRN) or a physician assistant (PA). Both of these primary care providers are mid-level providers. The salary range for a mid-level provider is less than a primary care physician; and the salary range for mid-level providers varies significantly depending on the location and responsibilities.

Normally, a mid-level provider will receive a starting salary from \$65,000 to \$100,000, whereas a primary care physician may start at \$125,000 to \$250,000. Unfortunately, chiropractic physicians are oftentimes hired as a mid-level with a lower salary than a medical physician.

## Prescriptive Authority

Federally Qualified Health Centers and Community Health Centers hire both primary care providers and primary care physicians. Both provider levels are expected to have prescriptive authority. Therefore, in most states in America and provinces in Canada, chiropractic physicians *would not* be permitted to function as primary care providers or primary care physicians.

*Note:* Advanced-practice chiropractic physicians in New Mexico might be able to function as primary care physicians because they have prescriptive authority.

Prescriptive Authority: The limited authority to prescribe certain medications according to established protocol. In the U.S., prescriptive authority has been granted to advanced practice nurses, optometrists, osteopaths, physicians, podiatrists, and veterinarians among other health care professionals.<sup>3</sup>

## Neuromuscular Specialists?

Federally Qualified Health Centers (FQHCs) may credential a chiropractic specialist within a primary care facility. Usually, the chiropractic specialists evaluate and manage patients with chronic pain and neuromusculoskeletal conditions.

Recently, I became aware of a chiropractic physician who was granted privileges to practice nonpharmacological pediatrics within an FQHC. The neuromusculoskeletal medicine program at the University of Bridgeport was developed to meet the need for chiropractic physicians to qualify to provide treatment within FQHCs.

Federally Qualified Health Centers are community-based health care providers that receive funds from the HRSA Health Center Program to provide primary care services in underserved areas. They must meet a stringent set of requirements, including providing care on a sliding fee scale based on ability to pay and operating under a governing board that includes patients.

Federally Qualified Health Centers may be Community Health Centers, Migrant Health Centers, Health Care for the Homeless, and Health Centers for Residents of Public Housing.

The defining legislation for Federally Qualified Health Centers (under the Consolidated Health Center Program) is Section 1905(l)(2)(B) of the Social Security Act.<sup>4</sup>

Federally Qualified Health Centers, Community Health Centers, Rural Health Centers, hospitals, and medical centers are serving patients with chronic neuromusculoskeletal pain syndromes, plus other chronic diseases including obesity, addictions, heart disease, and diabetes without many chiropractic physicians. The integration of chiropractic physicians is part of the solution to the evaluation and management of patients with chronic diseases.

## Ethical and Legal Responsibilities

If chiropractic physicians intend to become primary care providers or primary care physicians, postdoctoral programs must provide high-quality, evidence-based and patient-centered primary care training that leads to advanced-practice status. The DC behind a chiropractic physician's name should not indicate "Don't Continue" training.

Of course, chiropractic primary care physicians will bear a higher level of ethical and legal responsibilities with prescriptive authority. *Primum non nocere!*

Health care workers have a legal and ethical responsibility to protect the patients they care for. When these responsibilities are ignored, patients suffer. Additionally, health care workers can be held responsible for these behaviors. Ethical behavior or responsibility is doing the right thing for the patient.<sup>5</sup>

#### Food for Thought

- Do you know that a chiropractic physician's private practice can be purchased by a hospital system?
- If you would like to offer chiropractic services within Federally Qualified Health Centers, consider postdoctoral training that leads to board certification as a chiropractic specialist.
- Do you know you could be hired as a primary care provider as a neuromusculoskeletal medicine specialist?
- If you have a desire to become a primary care provider / physician, you will need to complete primary care training and credentialing that will expand your scope of practice to include prescriptive authority.
- Do you believe it is time for chiropractic schools to offer primary care training to include prescriptive authority?
- Do you know the Joint Commission requires medical facilities to provide nonpharmacological treatments for patients in pain, which includes chiropractic (and acupuncture)?

If you would like to pursue integration into a health care system as a chiropractic specialist, primary care provider or physician, now is the time to take action.

#### References

1. Stimmel B. The need for more primary care physicians to contain costs and improve access: myths versus realities. *Mt Sinai J Med*, 1996 Jan; 63(1):49-59.
2. Knight V. America to face a shortage of primary care physicians within a decade or so. *The Washington Post*, July 15, 2019.
3. Medical Dictionary. <https://medical-dictionary.thefreedictionary.com/prescriptive+authority>.
4. Health Resources and Services Administration (HRSA). <https://www.hrsa.gov/opa/eligibility-and-registration/health-centers/fqhc/index.html>.
5. Ethical and Legal Responsibilities of Healthcare Workers. <https://study.com/academy/lesson/ethical-legal-responsibilities-of-healthcare-workers.html>.

MARCH 2020