SENATE BILL REPORT

SHB 1629

AS REPORTED BY COMMITTEE ON HEALTH & LONG-TERM CARE, APRIL 4, 1991

Brief Description: Redefining the practice of chiropractic.

SPONSORS: House Committee on Health Care (originally sponsored by Representatives Prentice, Wood, R. Meyers, Franklin, Day, Miller, Ludwig, Morris, Pruitt, Brough, Braddock, Anderson, Betrozoff, Cooper, Fuhrman, R. King, McLean, Cantwell, Leonard, Kremen, Nealey, Phillips, P. Johnson, Wynne and Dorn).

HOUSE COMMITTEE ON HEALTH CARE

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: Do pass as amended.

Signed by Senators West, Chairman; L. Smith, Vice Chairman; Amondson, Johnson, L. Kreidler, and Niemi.

Staff: Scott Plack (786-7409)

Hearing Dates: March 27, 1991; April 4, 1991

BACKGROUND:

Chiropractic is a health care profession directly accessible by the public, and chiropractors must be licensed by the state in order to practice their profession. The chiropractic scope of practice involves primarily the detection and correction of neuronal disturbances of the spine by adjustment and manipulation of the vertebral column and its immediate articulations.

Chiropractic does not presently include nonspinal procedures, such as the manipulation of extremities.

Chiropractors may identify themselves as "chiropractors", "D.C.", "D.C.Ph.C.", or "Dr." in conjunction with the word chiropractic or chiropractor. The use of the title "chiropractic physician" is not presently authorized. However, the use of the title of "physician" is not prohibited by law so long as it is employed in connection with a description of a branch of the healing arts.

Chiropractors licensed in other states may be granted a license to practice in this state, if their states of origin have equal standards, and they complete examinations in chiropractic, x-ray and adjustment.

There is no exemption from the requirement of licensure provided for students, clinical postgraduate trainees, or

eligible applicants for the examination practicing chiropractic in this state.

SUMMARY:

Chiropractic is defined as an alternative health care practice.

The chiropractic scope of practice is expanded to include nonspinal procedures, including manipulation of extremities complementary to or preparatory to a chiropractic spinal adjustment.

Practitioners may refer to themselves as "chiropractic physicians" in addition to their other titles.

Chiropractors licensed in U.S. territories, the District of Columbia, Puerto Rico, and Canada, as well as in other states, may be granted a license to practice, if those jurisdictions have substantially equivalent qualifications and applicants complete any examinations required by the board.

Exemptions from licensure are provided for: chiropractors from other jurisdictions practicing temporarily in this state; regular senior students enrolled in accredited chiropractic schools; clinical postgraduate trainees; and eligible applicants waiting to take the next available licensing examination who practice under the direct supervision of a licensed chiropractor. Persons exempt from licensure are subject to disciplinary procedures provided by law.

Appropriation: none

Revenue: none

Fiscal Note: available

SUMMARY OF PROPOSED SENATE AMENDMENT:

The striking amendment deletes the provisions expanding the chiropractic scope of practice that would have allowed them to do manipulations of extremities.

A Peer Review Committee is established. The committee is composed of eight chiropractors, a member of the Chiropractic Disciplinary Board who shall chair the committee and vote only to break ties, one representative of the insurance industry, and one member who is a representative of the Department of Labor and Industries.

The bill defines chiropractic review as an evaluation of appropriate quality, utilization and cost of health care services provided to a patient. The board may not address issues associated to licensure, scope of practice or discipline of any health care profession.

Peer review may be initiated by a patient, a patient's representative, a state agency or a chiropractor. The

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Chiropractic Disciplinary Board shall review each request and decide whether peer review should occur or whether to recommend voluntary medication or to consider the case as a disciplinary matter. If peer review is deemed appropriate, the board shall refer the case to the Peer Review Committee. Subcommittees may be formed by the committee but the committee must review and approve all subcommittee decisions.

Persons requesting peer review, and all chiropractors subject to peer review, must submit necessary records. The cost of peer review shall be borne by the chiropractic profession through licensure fees, except that when the requesting party is a chiropractor or a third-party payer, the board must assess a fee to the requesting party.

When the peer review reaches a finding it must submit its finding to all parties involved in the review and to the Chiropractic Disciplinary Board. Any party may appeal the decision to the board. If the Peer Review Committee suspects unprofessional conduct on the part of a chiropractor, it must file a complaint with the Chiropractic Disciplinary Board.

The board is required to biennially prepare a report summarizing peer review decisions as part of its biennial report to the Legislature on disciplinary actions taken against license holders.

The findings and decisions of the committee may not be admissible in any court or administrative proceeding.

The Senate Ways and Means Committee and the House Appropriations Committee are to contract out a study to at least examine the extent chiropractic services are used for acute care versus maintenance treatment, and to study the expected impact on utilization and cost to payers of expanding the scope of practice to include extremity manipulations. A \$30,000 appropriation is made to the Senate to contract out for the study.

TESTIMONY FOR:

The chiropractic peer review will permit the profession to monitor its members to assure the delivery of appropriate treatment and reasonably priced services. The expansion of the scope of practice in the House version would have permitted the public who use chiropractic services to receive more complete chiropractic care.

TESTIMONY AGAINST:

The House version permitting chiropractors to manipulate extremities may result in overutilization of chiropractic services and higher health care costs.

TESTIFIED: Dr. Kenneth Martin, Washington State Medical Association (con); Melanie Stewart, Washington Self-Insurers' Association (con); Kristen West, Health Care Authority (con); Dr. Kelly Pearson, Dr. Tom Campbell, chiropractors (pro);

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Frank Morrison, Bassett & Morrison - WSPMA (con); Les James, Department of Social and Health Services (con); Clif Finch, Association of Washington Business (con); Courtney Nevit, Department of Labor and Industries (con); Gary Franklin, Department of Labor and Industries (con); Margaret Stanley, Health Care Authority (con)