

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

STATE BOARD OF CHIROPRACTIC

\* \* \* \* \*

IN RE: SPECIAL MEETING

\* \* \* \* \*

BEFORE: JOSEPH HALLORAN, Chair

Michael Swank, Member

Kelsie Coats, Member

William Aukerman, Member

John McCarrin, Member

HEARING: Thursday, September 23, 2021

1:16 p.m.

LOCATION: Telephonic

WITNESSES: NONE

Reporter: Samantha Sabatini

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A P P E A R A N C E S

1  
2  
3  
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9  
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14  
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## I N D E X

1		
2		
3	DISCUSSION AMONG PARTIES	5 - 14
4	OPENING STATEMENT	
5	By Chris Young	14
6	OPENING STATEMENT	
7	By Jason Martin	15 - 18
8	OPENING STATEMENT	
9	By Sam Marshall	19 - 20
10	QUESTIONING BY BOARD	21 - 49
11	CLOSING	
12	By Dr. Chris Cianci	49 - 52
13	CLOSING	
14	By Chris Young	52
15	CLOSING	
16	By Jason Martin	53
17	CLOSING	
18	By Sam Marshall	53 - 54
19	DISCUSSION AMONG PARTIES	54 - 56
20	CERTIFICATE	
21		
22		
23		
24		
25		

E X H I B I T S

1  
2  
3  
4  
5  
6  
7  
8  
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11  
12  
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14  
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24  
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		Page
<u>Number</u>	<u>Description</u>	<u>Offered</u>

NONE OFFERED

## P R O C E E D I N G S

1  
2  
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CHAIR: Okay. This is Chairman of the Board of Chiropractic Examiners, Dr. Halloran. I call this meeting to order. There's going to be a rollcall of all participants, including board members. So we'll start with the board members first. Dr. Joseph Halloran, Chairman of the Board. I am present.

MR. SWANK: Dr. Michael Swank, education on the Board.

MS. COATS: Kelsie Coats.

MR. AUKERMAN: Dr. William Aukerman, State Board of Chiropractic.

MR. MCCARRIN: Dr. John McCarrin, State Board of Chiropractic.

CHAIR: Go ahead, Kelsie.

MS. COATS: Kelsie Coats, Board of Chiropractic with the Attorney General's Office present.

CHAIR: Commissioner? Is the Commissioner present?

MS. VANORDER: We can come back to him.

CHAIR: Okay.

MS. VANORDER: I'll go ahead and

1 introduce myself since I'm talking. Nicole VanOrder,  
2 Board Counsel.

3 CHAIR: Okay. All right.

4 So we have three participants. And if  
5 there's a case where there's two people in one group,  
6 each have a role to play, then we are going to need  
7 all of you to identify yourselves, identify the  
8 organization you are representing for the purposes of  
9 this meeting. PCA, please start.

10 MR. YOUNG: Hi. I'm Chris Young. I'm  
11 with the PCA. We do have three. I am one of the  
12 three speakers.

13 CHAIR: All right.

14 Well, we need to identify all three  
15 speakers, please.

16 DR. CIANCI: This is Dr. Chris Cianci.  
17 I'm speaking with the PCA today.

18 MR. MARTIN: This is Jason Martin. I  
19 am outside general counsel for the PCA.

20 CHAIR: Thank you.

21 MR. NEILSEN: Ed Neilsen with PCA. I  
22 will not be speaking today.

23 CHAIR: Okay.

24 MR. SNYDER: Jeff Snyder as well,  
25 treasurer for PCA. I will not be speaking as well,

1 but just listening in.

2 MR. BANCHAFF: Craig Banchaff,  
3 president of PCA. Not speaking today.

4 MR. MILLER: Keith Miller, vice-  
5 president of PCA. Not speaking today.

6 MS. BENEDETTO: Allison Benedetto,  
7 immediate past president of the PCA. Not speaking  
8 today.

9 CHAIR: Are there any other PCA  
10 representatives here?

11 MR. HACK: Andrew Hack, central  
12 regional director. Not speaking today.

13 CHAIR: Anybody else from the PCA?  
14 Okay. Pennsylvania Chiropractic Federation, are you  
15 present?

16 MR. MILLER: Mr. Chairman, Keith  
17 Miller here, but I'm not offering any other remarks  
18 beyond what we submitted.

19 CHAIR: Okay.  
20 So you have submitted a written  
21 statement and you prefer to put that to the record.

22 Correct?

23 MR. MILLER: That's correct.

24 CHAIR: All right.

25 So question to our counsel. Do we

1 have - does our Board have access to that written  
2 statement?

3 MS. VANORDER: We do. And that can be  
4 included.

5 CHAIR: Okay.

6 MS. VANORDER: Oh, sorry.

7 CHAIR: Are we going to read that into  
8 the record since we have a Court Reporter or how is  
9 this going to work?

10 MS. VANORDER: We can do that or we  
11 can just provide it to the Court Reporter.

12 CHAIR: Yes, but the problem is none  
13 of the board members have that statement.

14 MS. VANORDER: Okay.

15 It is included in the materials under  
16 the special meeting folder.

17 CHAIR: Okay.

18 MS. VANORDER: So the board members  
19 can access it there. Ted, would you like to, just for  
20 your statement, go ahead and read that into the record  
21 so we make sure that it's in the transcript?

22 MR. MILLER: I'm going to --- you have  
23 to give me a second because I don't have it in front  
24 of me. I was figuring I was just getting the written  
25 statement as the record.



1                   MS. VANORDER: Okay.

2                   Well, we'll continue with rollcall and  
3 if you don't have it, you know, one of us could read  
4 it then.

5                   CHAIR: Okay.

6                   The Pennsylvania Insurance Federation,  
7 is anyone present there?

8                   MR. MARSHALL: Yes. Sam Marshall with  
9 the Insurance Federation. You have our written  
10 comments. I hope you have our written comments. I'm  
11 not sure. And I don't imagine - we're happy to read  
12 that into the record if need be and happy to answer  
13 any questions.

14                   CHAIR: Okay.

15                   Is there anybody else from the  
16 Insurance Federation that is present, Mr. Marshall, or  
17 are you alone representing the Pennsylvania Insurance  
18 Federation?

19                   MR. MARSHALL: I think I'm alone  
20 today.

21                   MR. GREER: Actually, Sam, this is  
22 Jonathan Greer from the Insurance Federation. I'm  
23 taking part and I'll be listening in. Thank you.

24                   CHAIR: Will you be speaking, Mr.  
25 Greer?

1                   MR. GREER: No. Thank you.

2                   CHAIR: Okay. Thank you. Okay.

3                   So I want to go over how the meeting  
4 will be conducted today. As your Board chair, I will  
5 just be supervising this meeting. Here is the - this  
6 is how we're going to proceed with this meeting. Each  
7 of the comments will be provided a five minute opening  
8 statement. So if somebody has sent a written  
9 statement in, but wants to give us - it doesn't have  
10 to be five minutes, but we would prefer you to have a  
11 few things to say. We'll point out from your written  
12 statement in that five minutes. But you'll get five  
13 minutes time if you choose to use it. So we want to  
14 be fair and have each group have a five minute opening  
15 statement, followed by a set of questions from the  
16 Board, with a two to three minute period to answer  
17 each question. This will be followed by any follow-up  
18 questions from the Board and a five minute closing  
19 statement for each group.

20                   So what we want to do is we'll provide  
21 - I imagine the Pennsylvania Chiropractic Association  
22 has someone going to speak for five minutes. I will  
23 be timing it and I will give you some notice when you  
24 got like 30 seconds to wrap it up. But please,  
25 Pennsylvania Chiropractic Association, whoever your

1 speaker is for this first five minutes, start.

2 MR. YOUNG: Good afternoon. I am  
3 Chris Young, the PCA secretary and -.

4 MS. ROBERTS: Nicole, you're muted.

5 MS. VANORDER: I'm sorry. But before  
6 we continue, I don't think we actually completed  
7 rollcall. I believe there's still some individuals,  
8 the Board administrator, the Commissioner, and I don't  
9 know if there's anybody else in the audience. I just  
10 want to get that clear for the record before we move  
11 forward, and I'm sorry to step on your feet.

12 CHAIR: Okay. We'll reset the timer.

13 MR. YOUNG: Thank you.

14 CHAIR: Could we get - is there  
15 anybody else that has not identified themselves as  
16 participating in this meeting either speaking or just  
17 listening? Could you please identify yourself so it  
18 gets onto the record?

19 MS. SIDLE: Yes. Nicole Sidle,  
20 executive director for the House Professional  
21 Licensure Committee. I am observing today on behalf of  
22 the Committee. I've been working on this issue for  
23 over two years for Representatives Lawrence and  
24 former, and a former representative who is on the  
25 committee as well.

1           CHAIR:    Okay.

2           Commissioner Johnson, are you with us?

3           COMMISSIONER JOHNSON:  I am.  I  
4 understand I missed my intro.  I apologize.  At the  
5 risk of prolonging any of this, I just want to do the  
6 following.  I want to thank everyone who is present  
7 today at this meeting.  I want to thank specifically  
8 the stakeholders who provided the written testimony  
9 and representing today.  I also want to thank our  
10 colleagues in the general assembly.  We have the  
11 executive directors of our Senate and House Oversight  
12 Committees; our House Professional Licensure  
13 Committee, our Senate Professional Licensure, and  
14 Consumer Protection Committee are both here.  I heard  
15 Nicole.  I don't know if I've had a chance to hear Jen  
16 introduce herself, but they have been remarkably  
17 responsive and collaborative.

18                           And just to provide the context for  
19 everybody in this meeting, this special meeting was  
20 called because the Board, as everyone is well aware,  
21 the Board does not have the authority or the ability  
22 to lobby directly to a legislature.  That's not the  
23 Board's role.  However, when there is an issue of  
24 import like the one that we're discussing today, the  
25 Board does have within the gambit the ability to help

1 create and help foster the record around issues of  
2 importance to the regulated community and to the  
3 Licensees that they do have oversight of. So this is  
4 the opportunity for all the interested parties to  
5 place all of those concerns on the record so that we  
6 can craft that record, and so that we can provide that  
7 record up to those committee members and to our  
8 executive directors, so that they are better informed  
9 around this issue. And that we've done our due  
10 diligence in ensuring that there has been a  
11 transparent, and there has been a deliberate, and  
12 there has been an equitable discussion for all of the  
13 interested parties on both sides of this issue.

14                   So I want to, again, I want to stress,  
15 I can't stress enough how thankful I am that folks  
16 were able to do this in a manner that promotes  
17 positive discourse and hopefully helps move along.  
18 Certainly whatever, you know, whatever the Board  
19 needs, our job as the Bureau is to make sure that we  
20 can help accommodate those needs and those requests,  
21 especially when they impact and implicate public  
22 health and public safety. So Chairman, I will turn  
23 these proceedings graciously back over to you. I  
24 would like to note that because I am only able to be  
25 present for the first half of this meeting, Deputy

1 Commissioner Arion Claggett will be following in my  
2 stead for the latter half of this meeting around 1:45,  
3 1:50. So I just wanted to note that in the record for  
4 the stenographer's edification so he will closing out  
5 that meeting. But with that, I've taken enough of  
6 everybody's time. I will shut up now. Chairman,  
7 please proceed.

8 CHAIR: Okay.

9 So we'll start with the Pennsylvania  
10 Chiropractic Association. And you have five minutes  
11 starting now.

12 MR. YOUNG: Good afternoon. Good  
13 afternoon. I am Chris Young, the PCA secretary, and I  
14 am here to represent the PCA's board of directors and  
15 its membership. I will begin by stating that it is  
16 the position of the PCA to support legislation and or  
17 regulation that provides for the certification of  
18 trained and educated assistance under the direct  
19 supervision of a doctor of chiropractic, and  
20 regulations under the state board to enhance said  
21 legislation for regulations. The premise of the PCA's  
22 position is within consistency and training and the  
23 support of the PCA's certified chiropractic assistance  
24 bill. I would now like to turn it over to the PCA's  
25 general counsel, Jason Martin.

1                   MR. MARTIN: Good afternoon, Chairman  
2 Halloran, members of the Board, and others who are  
3 present today. My name is Jason Martin. I am an  
4 attorney and I currently serve as outside general  
5 counsel for the PCA. I have served in this capacity  
6 for ten years. For over 15 years, I've represented  
7 chiropractors and other healthcare providers for  
8 various legal matters. Thank you for allowing me this  
9 opportunity to present testimony today regarding the  
10 issue of delegation of services by a chiropractor to  
11 unlicensed supported personnel.

12                   The focus of my testimony today is to  
13 provide a summary of Pennsylvania law following the  
14 case of State Farm Mutual Automobile Insurance Company  
15 and State Farm Fire and Casual Company versus Robert  
16 J. Cavoto, Junior, et al. My testimony today will  
17 also describe and underscore the importance of an  
18 amendment to the Pennsylvania Chiropractic Practice  
19 Act aka the Act to establish a formal certification  
20 program to permit unlicensed individuals who are  
21 certified to perform therapeutic exercises in a  
22 chiropractic office. By way of brief background, the  
23 relevant section of the Pennsylvania Chiropractic  
24 Practice Act is in section 601 titled supported  
25 personnel. The section states nothing in this act

1 shall prohibit a licensed chiropractor from utilizing  
2 the assistance of unlicensed supportive personnel  
3 performing under the direct on-premises supervision of  
4 a licensed chiropractor provided that a chiropractor  
5 may not delegate any activity or duty to such  
6 unlicensed individuals which requires formal education  
7 or training in the practice of chiropractic or the  
8 knowledge and skill of a licensed chiropractor.

9           After many years of litigation, the  
10 courts involved in the Cavoto case, including the  
11 Delaware County Court of Common Pleas and the  
12 Pennsylvania Superior Court issued a series of  
13 decisions. The decisions can be summarized as  
14 follows. First, the practice act does not require  
15 chiropractors to personally administer all  
16 chiropractic treatment. Second, non-specialized tasks  
17 associated with the performance of passive modalities  
18 may be delegated to unlicensed support personnel so  
19 long as the licensed chiropractor has made all the  
20 clinical decisions. Specifically, the courts  
21 identified electrical muscle stimulations, mechanical  
22 traction, hot and cold packs, and hydrotherapy at some  
23 of the modalities that may be delegated to unlicensed  
24 support personnel. Third, therapeutic procedures such  
25 as massage, manual therapy, and therapeutic exercise



1 may not be delegated to unlicensed support staff.

2                   It should be noted that Dr. Jonathan  
3 McCullough, past president of the State Board of  
4 Chiropractic testified as an expert on behalf of Dr.  
5 Cavoto. Dr. McCullough testified in part that the use  
6 of unlicensed support personnel for delegation of  
7 therapeutic activities is standard chiropractic  
8 practice and permitted under the Chiropractic Practice  
9 Act. He also testified that it is acceptable under  
10 the Chiropractic Practice Act to utilize support  
11 personnel and the administration of adjunctive  
12 procedures as long as the chiropractor remains on-  
13 premises. His testimony is consistent with a long-  
14 held belief that modalities and therapeutic exercise  
15 can be delegated to unlicensed support of personnel so  
16 long as the chiropractor remains in control of the  
17 clinical decision-making and the chiropractor remains  
18 on premises during the application of the modalities  
19 or the performance of the therapeutic exercise.

20                   In fact, many chiropractors for years  
21 if not decades delegated the modalities and  
22 therapeutic exercises to trained, but unlicensed  
23 staff. While the decisions in the Cavoto case  
24 reinforce the long-held understanding that  
25 chiropractors are permitted by the Act to delegate to

1 unlicensed staff the application of modalities on  
2 patients, the Cavoto decisions prohibiting the  
3 delegation of therapeutic exercise was surprising to  
4 many. As such, the PCA believes that the Pennsylvania  
5 legislature -

6 CHAIR: Thirty (30) seconds.

7 MR. MARTIN: - should pass an  
8 amendment to the Act -

9 CHAIR: You've got 30 seconds.

10 MR. MARTIN: - that establishes a  
11 formal education and training process, as well as  
12 examination requirements determined by the State Board  
13 of Chiropractic, and to permit and exercise  
14 certifications so that qualified individuals can work  
15 one-on-one or in a group setting with patients in  
16 their performance of therapeutic exercise in the  
17 chiropractic office. The PCA supports a certification  
18 program to permit certified individuals to perform  
19 therapeutic exercise, which is only one of the many  
20 therapeutic procedures since neither license nor  
21 certification is required for application of  
22 modalities under Pennsylvania law, the PCA supporting  
23 a very narrow amendment to the act to create a class  
24 of certified individuals who can perform therapeutic  
25 exercise.

1                    CHAIR: Okay. Thank you, Mr. Martin.  
2 We'll give you time to do a follow-up finish at the  
3 end, but we have to move on to the next Respondent.  
4 But thank you for that. All right.

5                    So Mr. Mowatt, you've got five minutes  
6 to make an opening statement for the Insurance  
7 Federation. Mr. Mowatt, are you present? Not for the  
8 Insurance Federation, I'm sorry. I clouded the  
9 record. For the Federation of Chiropractic. Is  
10 Federation there? Mr. Mowatt for the Federation, are  
11 you there?

12                    Okay. We will move on to the  
13 Insurance Federation. We'll try to come back to Mr.  
14 Mowatt and see if he wants to be connected with us.  
15 So go ahead Insurance Federation. Mr. Marshall, if  
16 you have something to say, you have five minutes.

17                    MR. MARSHALL: Thank you. Sam  
18 Marshall with the Insurance Federation. I'm sorry. I  
19 didn't know there were so many other outfits named  
20 Federation. But you have our remarks and I think the  
21 Chiro Association sent it. We're working together on  
22 legislation that would put, you know, that would amend  
23 the Act to put parameters and set some rules on just  
24 what can be delegated to unlicensed personnel, in  
25 particular the therapeutic exercises and creating a

1 new class. From our perspective, and it's something  
2 that we would recommend, it would mirror very much  
3 what the rules are for physical therapists and we  
4 think that's a reasonable construct. We have some  
5 differences as we're going through the details with  
6 the chiropractic association and we're trying to  
7 resolve those. But you have our remarks and we're  
8 happy to answer any questions on those remarks. Thank  
9 you.

10 CHAIR: Okay. Thank you.

11 Mr. Mowatt, are you available or the  
12 Chiropractic Federation? Okay. So I'll assume that  
13 Mr. Mowatt is going to stand by his written statement  
14 and hopefully he'll be available to answer any  
15 questions that we have posed to him.

16 The next part of this meeting will be  
17 questions and some follow-up questions. And so I  
18 would, will tell you how this is going to work. We  
19 have Chiropractic Board members. We will be asking  
20 questions that were part of our agenda, published  
21 agenda, and any follow-up questions will be asked  
22 based on responses from the attendance. So we'll  
23 start with Dr. Swank. And what we intend to do with  
24 the published questions, what we intend to do is have  
25 each of the stakeholders that are with us today answer

1 those questions to the best of their abilities for the  
2 record and we want to make sure everybody has their  
3 voice heard on this. So we'll start with Dr. Swank  
4 who will ask the first question. We'll start with the  
5 Pennsylvania Chiropractic Association. Dr. Swank, can  
6 you ask your question?

7 MR. SWANK: Yes. To the PCA, what is  
8 your membership composition currently?

9 MR. MARTIN: Chris Young, do you want  
10 to answer that?

11 MR. YOUNG: As far as total members,  
12 we are just under 1,000.

13 MR. SWANK: And do you have any other  
14 memberships other than chiropractic?

15 MR. YOUNG: Dr. Swank, the answer to  
16 that question is no. The bylaws only allow for  
17 membership to be chiropractors.

18 MR. SWANK: Okay.

19 Would the Insurance Federation, your  
20 members are, to Sam Marshall?

21 MR. MARSHALL: Yeah. I'm sorry. I  
22 had to unmute. Our members are insurance companies in  
23 all lines of business doing, you know, offering  
24 insurance in Pennsylvania. Includes health insurers,  
25 workers' comp, and auto insurers. So all of which

1 routinely deal with provider claims, including most  
2 chiropractors.

3 MR. SWANK: And is there anybody from  
4 the Chiropractic Fellowship? I guess not.

5 CHAIR: Mr. Mowatt, are you here at  
6 the meeting right now or has Mr. Mowatt left the  
7 meeting? Okay. I can only assume that the  
8 Chiropractic Fellowship wants to just make their  
9 statement and not answer any questions. We were  
10 hoping that they would be here for the question and  
11 answer session because that would certainly give us  
12 more information. And as Commissioner Johnson pointed  
13 out, more information is better than less information.  
14 So hopefully Mr. Mowatt is listening and decides that  
15 he wants to jump in on these questions, and he could  
16 just identify that he's ready to go and we'll go from  
17 there. All right.

18 So Kelsie Coats, let us have a  
19 question from you.

20 MS. COATS: Okay.

21 For the PCA, what is your  
22 recommendation or suggested path forward?

23 MR. YOUNG: Sorry. For what going  
24 forward?

25 MS. COATS: What is your

1 recommendation or suggested path forward?

2                   CHAIR: Regulation.

3                   MS. COATS: Regarding regulations.

4                   MR. YOUNG: Well, our path currently  
5 is to have an amendment to the act that provide for or  
6 permits for a certification process for individuals to  
7 become certified to perform the therapeutic exercise.

8     As part of that, as part of the act or the amendment  
9 to the act as we envision, it would give the State  
10 Board of Chiropractic the power to establish a  
11 curriculum or courses in order to achieve a certain  
12 level of education and training. At which point, that  
13 individual would take an examination that would also  
14 be part of regulations promulgated by the Board. Once  
15 that examination is passed, then that individual would  
16 become certified and could then perform the  
17 therapeutic exercises in a chiropractic office. So  
18 it's really two-fold. It's legislation with amendment  
19 to the Act giving the Board additional powers which it  
20 currently doesn't have.

21                   MS. COATS: Thank you. Does anybody  
22 on the Board have a follow-up question for that? I  
23 don't have anything.

24                   CHAIR: Okay.

25                   I assume the Chiropractic Fellowship

1 is not here to answer that question. Mr. Mowatt, same  
2 question.

3 MS. VANORDER: I do have the statement  
4 here if you would like that into the record.

5 CHAIR: How long is that, would that  
6 take?

7 MS. VANORDER: It's one page. I don't  
8 think it would take that long.

9 CHAIR: Okay.

10 So they didn't use their five minutes  
11 and this would probably answer the question that Ms.  
12 Coats has just asked. So why don't we read that into  
13 the record?

14 MS. VANORDER: Dear members of the  
15 Board, this letter is to submit testimony on behalf of  
16 the members of the Chiropractic Fellowship of  
17 Pennsylvania, the CFoP, to the Pennsylvania State  
18 Board of Chiropractic in regard to a ruling from the  
19 State Farm Mutual Insurance versus Dr. Robert Cavoto  
20 case in 2018 which brought into question the  
21 supervised delegation of therapeutic procedures to  
22 unlicensed supportive personnel. CFoP recognizes the  
23 current Pennsylvania Chiropractic Practice Act, CPA,  
24 as its governing scope of practice for all licensed PA  
25 chiropractors. The section of the CPA that is being



1 considered is listed below. Section 625.601 supported  
2 personnel. I don't think we need to read that since  
3 that's part of the regulation.

4 CHAIR: Yes.

5 MS. VANORDER: - and that can be  
6 found. Prior to the ruling on the state Farm Mutual  
7 versus Cavoto, it has been well understood that the  
8 delegation of specific procedures under the direct  
9 supervision by a licensed PA chiropractor to  
10 unlicensed supportive personnel is safe and effective  
11 for clinical purposes. The main concern as healthcare  
12 professionals is our commitment first to the public  
13 safety while performing and recommending any clinical  
14 procedure. The leadership of the CFoP supports the  
15 rights of the individual licensed chiropractor to  
16 practice as they see fit in accordance to the laws and  
17 practice standards. Sincerely, Chiropractic  
18 Fellowship of Pennsylvania Board of Directors.

19 CHAIR: Okay.

20 Thank you, Ms. VanOrder for reading  
21 that into the record because I think that would be the  
22 Chiropractic Fellowship of Pennsylvania's intention is  
23 to get that, their response read into the record. And  
24 we need to allow them to do that at least on a minimal  
25 basis for fairness. All right.

1 So Kelsie Coats, you would like to -

2 MS. COATS: Yes.

3 CHAIR: - ask a question to the  
4 Insurance Federation.

5 Correct?

6 MS. COATS: Yes. The same question to  
7 the Insurance Federation. What is your recommendation  
8 or suggested path forward in terms of legislation?

9 MR. MARSHALL: We're working on the  
10 legislation it would be to establish in the bigger  
11 mirror what goes on. In the physical therapy act, in  
12 terms of the certified physical therapy act, it's a  
13 certified physical therapist. In a - bill, it would  
14 be a certified chiropractic assistant. And that would  
15 handle the therapeutic exercises. There's - we would  
16 also want the same standards on supervision and direct  
17 access and ongoing supervision, and the same rules on  
18 what even after therapeutic exercises what can be  
19 delegated to unlicensed support personnel and  
20 supervision there.

21 MS. COATS: Okay. Thank you.

22 Does anybody on the Board have any  
23 follow-up questions for that? I don't have anything.

24 CHAIR: The only follow-up question I  
25 would have for the Insurance Federation is obviously

1 you're just representing the stakeholders in  
2 Pennsylvania, but the insurance industry as a whole is  
3 national. And we are aware in the state of  
4 Pennsylvania that other states automatically accept  
5 chiropractic delegation of therapeutic exercise as  
6 just part of a chiropractor's right and practice. Why  
7 do you feel that we need to go an extra step towards  
8 certification for licensure?

9 MR. MARSHALL: First, Doctor, I'd  
10 suggest states are --- it's not as if Pennsylvania is  
11 one state and the other 49 do it the other way. You  
12 know, I realize that state controls on chiropractic,  
13 you know, practices are going to vary state to state.  
14 And I think there are variations here. What we're  
15 suggesting is we would not believe an outlier across  
16 the country and we believe that the consistency with  
17 the Physical Therapy Act and the rules that control a  
18 physical therapist is in the best interest for  
19 patients in terms of assuring quality care and trying  
20 to hold down the cost and have professional services.

21 CHAIR: Okay. Thank you for answering  
22 that. So we will move on to Dr. Aukerman right now.  
23 Dr. Aukerman, could you ask the next question,  
24 starting with asking that question to the Pennsylvania  
25 Chiropractic Association?

1                   MR. AUKERMAN: This is William  
2 Aukerman. I'm a State Board member. I have a  
3 question for the Pennsylvania Chiropractic  
4 Association. Do you have any data or documentation or  
5 other evidence to support your position in adding this  
6 regulation?

7                   MR. YOUNG: Jason?

8                   CHAIR: Does the PCA understand that  
9 question? The Board is specifically asking what data  
10 do you have that supports getting chiropractic  
11 assistance either certified or licensed and why is  
12 that important? Go ahead, PCA.

13                   DR. CIANCI: Jason, are you able to  
14 respond to that?

15                   CHAIR: Do you have somebody to  
16 respond to that?

17                   DR. CIANCI: It's possible that ---  
18 Jason, are you there?

19                   MR. YOUNG: This is Chris. I don't  
20 believe --- I don't know if Jason is still on the  
21 call.

22                   CHAIR: Well, can you answer the  
23 question?

24                   MR. YOUNG: Sure. So the --- my  
25 interpretation of your question is asking if we have

1 data. There was a comparison to contiguous states  
2 that was completed based on other states having the  
3 right to delegate under their license. Other than  
4 that, the documents that would have been reviewed  
5 would be, of course, the ruling that took place from  
6 the State Farm versus Cavoto case. That would be  
7 something that was significantly evaluated. And then  
8 going forward, it was the position of the PCA to  
9 address this legislatively. And therefore, the PCA  
10 has also drafted a bill and that would also be  
11 something that has been created with data.

12 CHAIR: Okay.

13 Is that your answer, complete answer?

14 MR. YOUNG: Sure.

15 MS. VANORDER: Sorry. If I could just  
16 interject for a second. Are those documents something  
17 that you would want to share and have the Court  
18 Reporter include in this transcript?

19 MR. YOUNG: Sharing documents at this  
20 time would be up to our general counsel. I do not  
21 know if our general counsel is still on this call.

22 CHAIR: Okay.

23 MR. MARTIN: Yeah. I just, I don't  
24 know. For some reason, if everyone can hear me, I can  
25 hear everyone and I was talking, but apparently no one

1 could hear me, so I jumped off and just dialed back  
2 in. So I apologize for that.

3 CHAIR: Okay.

4 So follow-up question. Did you hear  
5 it and can you --- I'll give you two minutes to answer  
6 any type of data or evidence that you have for the  
7 PCA's, I guess the PCA support of some sort of  
8 certification or licensure of chiropractic assistants.  
9 Could you please give us that data?

10 MR. MARTIN: Well, I'm not sure if the  
11 PCA has actual data. What we have is, you know,  
12 discussion amongst various members who have, you know,  
13 clearly and unequivocally indicated how the Cavoto  
14 decision has impacted them. And after careful  
15 deliberation and discussion with members, there seemed  
16 to be basically a couple different approaches that  
17 could have been taken. And it was decided that we  
18 would pursue a certification for therapeutic  
19 exercises, as a certification seems to be a remedy  
20 that would make sense for everyone involved.

21 CHAIR: Okay. So thank you for your  
22 answer on that.

23 Ms. Coats, could you repeat the  
24 question? I assume Chiropractic Fellowship of  
25 Pennsylvania is not answering questions. Mr. Mowatt,

1 are you here? All right. So could -.

2 MR. MOWATT: Yes.

3 CHAIR: Go ahead.

4 MR. MOWATT: Sorry. I had to jump off  
5 for another meeting. I thought I mentioned on the  
6 call in the chat that I had to get off. So I'm sorry.  
7 I don't know what the questions are.

8 CHAIR: Okay.

9 Just to let you know now that you're  
10 back on, for your five minute statement, we read the  
11 statement -

12 MR. MOWATT: Okay.

13 CHAIR: - from the Chiropractic  
14 Fellowship of Pennsylvania into the record.

15 MR. MOWATT: Oh, great. Thank you.

16 CHAIR: And now we're doing questions.  
17 And this question is from Ms. Coats on our Board. So  
18 Ms. Coats, could you ask Mr. Mowatt that question and  
19 see if he has any information for you?

20 MS. COATS: You want me to go back to  
21 number two? Because we were on three.

22 CHAIR: Let's not go from the  
23 beginning. Let's go right to where we are with number  
24 two.

25 MS. COATS: So we're on three right

1 now.

2 CHAIR: Three. We're at three.

3 Three, three. I'm sorry.

4 MR. AUKERMAN: That was me, but -.

5 MS. COATS: I think that's Dr.

6 Aukerman.

7 CHAIR: Is that Dr. - all right. Dr.

8 Aukerman, go ahead. Ask that question.

9 MR. AUKERMAN: For Pennsylvania  
10 Chiropractic Federation, do you have any data or  
11 documentation to support your position based on your  
12 letter of what you want done?

13 MR. MOWATT: I'm not sure that  
14 there's, what you want documented. We quoted the part  
15 of the statute that was relevant.

16 CHAIR: All right. So let me ask this  
17 as a follow-up question, Mr. Mowatt. It is - based on  
18 what was read into the record from your letter, it is  
19 the opinion of the Chiropractic Fellowship of  
20 Pennsylvania that chiropractors already by law have  
21 delegation powers and that your --- so you made it  
22 very clear that all of your members say we've already  
23 got delegation powers now. What we're asking you is  
24 some of the, just to catch you up, the Pennsylvania  
25 Chiropractic Association thinks it's a good idea to



1 make sure that chiropractic assistants go through  
2 extra training to get delegation powers and we just  
3 want it on the record as according to the Chiropractic  
4 Fellowship of Pennsylvania, you do not see that we  
5 need to change any part of the law because we already  
6 have delegation powers according to our law.

7 Correct?

8 MR. MOWATT: Well, we think -  
9 obviously the court --- the court differs in that  
10 opinion. So I'm not sure that - I mean, the point's  
11 kind of moot. But that's - you know, we believe that,  
12 you know, the bones are there for delegation. But  
13 whatever tweaks the Board can do within the parameters  
14 of the current law, we would recommend that they take  
15 them.

16 CHAIR: Okay.

17 Now, in fairness to the other entities  
18 here, we did ask a question. What is, you know, what  
19 is your membership composition? I mean, how many  
20 members do you have that are chiropractors with your  
21 very active group?

22 MR. MOWATT: We have about 150  
23 members, I believe. I just mostly do lobbying for  
24 them. I'm not their executive director, so I don't  
25 have all the demographic stuff. But our members are,

1 for the benefit of everybody else, I guess, are  
2 generally of the, what they call in the profession on  
3 the street chiropractor groups. You know, they  
4 believe in mostly hands-on approach to patients. A  
5 lot of them don't take insurances and some just do  
6 for minimal things. You know, but delegation is  
7 something that they believe is necessary in the  
8 office.

9                    CHAIR: Okay. Thank you. All right.  
10                    So Dr. Aukerman, you want to ask a  
11 question of the Insurance Federation?

12                    MR. AUKERMAN: Yeah. I have a  
13 question, I guess, for Sam Marshall. Data or  
14 documentation do you have to support your position in  
15 that DC's or their assistants should have, you know,  
16 like a physical therapy assistant certification? What  
17 makes that best in your mind?

18                    MR. MARSHALL: Frankly probably a  
19 little bit more necessity. Excuse me. You know, you  
20 have the Cavoto ruling and that's the law of the land.  
21 You know, we happen to agree with it. Appreciate  
22 that, you know, the chiropractic groups. That, you  
23 know, that points the need for a legislative change.  
24 We think that the physical therapist construct is a  
25 construct that seems to have worked well. I think the

1 physical therapist, you know, don't feel that it's  
2 unduly restricted or limiting in terms of quality care  
3 to patients. We haven't seen it as a problem. And so  
4 we think that that bodes well for trying to put that  
5 same regiment in place on the chiropractic side.

6 CHAIR: Mr. Marshall, just a follow-up  
7 on this. Is the Insurance Federation asking for a  
8 certification level or a licensure level because  
9 there's a difference there.

10 MR. MARSHALL: I'm sorry, Doctor.  
11 Certification.

12 CHAIR: Okay.  
13 So the physical therapy assistants are  
14 certified?

15 MR. MARSHALL: Correct.

16 CHAIR: Okay. Okay.

17 One other question, Mr. Marshall. I  
18 was told that when you go to a medical office and you  
19 have medical assistants drawing your blood, taking  
20 EKG's, doing a preliminary examination on orifices of  
21 your body and things like that, putting it in the  
22 record, that that extensive help to the physicians in  
23 the office is certified through medical assistants, of  
24 separate medical assistant law that is through their  
25 education and it's just they are educated to do this.

1 So my question would be could chiropractors make sure  
2 that they hired trained medical assistants and would  
3 that be something that the Insurance Federation would  
4 find acceptable as long as you knew that these people  
5 came out a certified medical program?

6 MR. MARSHALL: I'm not ---  
7 unfortunately, I've had some recent experience going  
8 into doctor's offices and having some heart work done.

9 So and I can tell you the only people who have at  
10 least worked on my body with those things have been  
11 licensed. They've actually been licensed nurses. But  
12 what we're talking about here is certification that  
13 would be state approved certification. And that's to  
14 perform those services. There's still going to be  
15 services below that level of professionalism that  
16 would be done by unlicensed support personnel, but  
17 even then there would have to be some trainings. It's  
18 not just somebody you picked in your first day on the  
19 job and no training. And I know we talk about hot and  
20 cold packs, but, you know, as a - we see patients, you  
21 know, gotten burned because it was improperly applied  
22 heat packs. So there's always going to be some level  
23 of training at the certification level for therapeutic  
24 exercise would be state certification.

25 CHAIR: Okay.

1           So are you saying that these type of  
2 medical mishaps occur specifically in a chiropractic  
3 office?

4           MR. MARSHALL: No. You know, that's a  
5 concern with unlicensed support personnel because we  
6 had done, you know, looked at it in terms of the  
7 chiropractic, you know, that's where we had seen it.  
8 But I'm sure that it happens - these things happen.  
9 And what you want to do is minimize them as much as  
10 possible. And that's where when you're dealing with  
11 unlicensed support personnel, there still has to be a  
12 level of supervision, and there should be a level of  
13 training and professionalism for them as well.  
14 Certainly those being build out that way.

15           MR. MCCARRIN: Mr. Marshall, my name  
16 is Dr. John McCarrin. Can you hear me okay?

17           MR. MARSHALL: Yes, sir.

18           MR. MCCARRIN: I have a question for  
19 you. If you want this to be similar to the physical  
20 therapist, the PTA program, does that mean you'd also  
21 be fine with the fact that you can have unsupervised,  
22 basically you're allowed to have indirect supervision  
23 as well like the PT's have?

24           MR. MARSHALL: You know, we've  
25 actually been discussing the type of supervision and I

1 mean, I'll defer to the Chiropractor's Association.  
2 But, you know, but I think we've said that that  
3 supervision level would be the supervision level. You  
4 appreciate there's, you know, if you're going to say  
5 it's parallel, it's parallel. You know, I think some  
6 of the differences with Chiropractic Association has  
7 questioned some of that, you know, whether  
8 chiropractors should have the same supervision  
9 requisites or have a little more latitude. And that's  
10 what we're in the middle of discussing these days with  
11 the Chiropractor's Association.

12 MR. MCCARRIN: Mr. Marshall, I have  
13 one other question. It's becoming a growing account  
14 with physical therapists that insurance companies are  
15 asking who performed this service, was it the physical  
16 therapist or the PTA, and the reimbursement is  
17 actually lower to the PTA if it was performed by them  
18 and not the actual physical therapist. Are you aware  
19 of that?

20 MR. MARSHALL: No. Although, you  
21 know, and I'd be interested in learning a little bit  
22 more, not that this is about physical therapy  
23 reimbursement. But I'm happy to - if that's of  
24 interest to me maybe more than the Chiropractor's  
25 Association. But I'd be - it wouldn't necessarily

1 surprise me that a PT assistant would get paid less  
2 than a PT. But I'm not sure if you're referring to -  
3 what I don't know is whether that's reimbursement that  
4 is set by the Medicare, a lot of insurances payment is  
5 determined - we all work off of Medicare reimbursement  
6 rates and a lot of different lines. I'm not sure if  
7 you're referring to any payment level differences that  
8 might be in say Medicare or Medicaid programs.

9 MR. MCCARRIN: All right. Thank you.

10 CHAIR: Okay. Good.

11 Let's move on so we can keep these  
12 questions flowing. Thank you for bearing with us on  
13 these questions and follow-up questions.

14 MR. YOUNG: Actually, please, this is  
15 Chris Young from the PCA. I do want to say as far as  
16 data is concerned, Nicole, I believe you were asking  
17 about sharing those things, and also this was  
18 something that had came up in a prior state board  
19 meeting. For comparison to contiguous states, there  
20 was a very interesting research study completed by a  
21 juris prudence candidate from 2021 from the American  
22 University Washington College of Law. That is  
23 available. It is a comparison for chiropractic  
24 assistant regulations, statutes, and policies across  
25 the United States of America. They're interesting and

1 I think it should be reviewed.

2 CHAIR: And that would be - if you  
3 have access to that, this is something that should be  
4 supplied to the State Board Counsel, Ms. VanOrder, so  
5 she can make sure -

6 MR. YOUNG: Absolutely.

7 CHAIR: - that you're answering the  
8 question we had, do you have any data. We need that  
9 data. So make sure that that gets to our, to Ms.  
10 VanOrder so we on the Board have access to that.

11 All right. So let's move on. I think  
12 we are back with Dr. Swank. Could you ask the next  
13 question, please, to the PCA first?

14 MR. SWANK: Yes. To the PCA, what  
15 specifically are you recommending to be changed in any  
16 regulation?

17 MR. MARTIN: Well, if the Act as we  
18 envision it - or I'm sorry. If the amendment as we  
19 envision it to the Act provides for certification as I  
20 previously mentioned, as part of that and somewhat  
21 consistent with the PTA's, there would be education  
22 and training requirements. And that would be reserved  
23 for the Board. So the Board by regulation would have  
24 to adopt specific educational and training programs in  
25 order for a certified assistant to be competent to



1 take an examination. And that examination for  
2 certification would also be in the Board's control.  
3 In other words, regulations by the Board would be  
4 necessary in order to adopt, you know, an examination  
5 protocol, you know, up to the Board. So the Board in  
6 a sense, would be in complete control for the most  
7 part of the educational and training requirements of  
8 the certified chiropractic assistant, as well as the  
9 examination that they would have to pass in order to  
10 become certified.

11 MR. SWANK: Thank you. And to -.

12 CHAIR: Mr. Mowatt, do you have -  
13 we'll get to your follow-up question in a second. Mr.  
14 Mowatt, I assume that based on the letter from the  
15 Chiropractic Fellowship of Pennsylvania, that the  
16 Fellowship is not looking for any regulatory or  
17 legislative change at this time.

18 Is that correct?

19 MR. MOWATT: Well, this is the first  
20 I've been made aware that there was conversations  
21 going on about changing the law with regard to  
22 assistants. So, you know, I can't really comment on  
23 that or much beyond what our association statement  
24 was. You know, if there are changes to the law,  
25 certainly we'd be, you know, up for looking at

1 regulatory change as well to follow that.

2 CHAIR: Okay. Thank you.

3 Then Dr. Swank, it's been a while  
4 since you asked your question. So could you ask that  
5 same question of Mr. Marshall of the Insurance  
6 Federation?

7 MR. SWANK: Yeah. Yes. What  
8 specifically are your recommendations to be changed  
9 and any regulations that might need to be changed as  
10 well?

11 MR. MARSHALL: The change would be to  
12 the Chiropractic Association Act to put in the similar  
13 provisions that are found in the physical therapy act  
14 with respect to certified assistants, and it extends  
15 into unlicensed, into what can be delegated to  
16 unlicensed support personnel, then I believe in the  
17 physical therapy situation is covered in regulation.  
18 It might be appropriate to do that here in statute  
19 simply because the regulatory, do a regulation after  
20 that and it's adding on a couple more years.

21 MR. SWANK: Okay.

22 CHAIR: Thank you. Dr. Swank, did you  
23 have a follow-up for anybody?

24 MR. SWANK: No, I didn't.

25 CHAIR: Okay. Here's my follow-up.

1 Does --- in order to achieve what is being proposed by  
2 the partnership between Pennsylvania Chiropractic  
3 Association and the Insurance Federation, does this  
4 proposal require opening up of the chiropractic law to  
5 achieve this or can we achieve this through either a  
6 regulation or legislative act that does not open the  
7 law? So we'll start with the Pennsylvania  
8 Chiropractic Association first to answer that.

9 MR. MARTIN: Yeah. I first object to  
10 the term partnership. There is no partnership. I  
11 think that the battle lines have been drawn and I  
12 think we all know what the legislative process is  
13 between various healthcare provider groups and the  
14 Insurance Federation. So I want to be clear on that.  
15 There is no partnership.

16 CHAIR: Okay.

17 So is this Jason Martin speaking?

18 MR. MARTIN: Yes, it is.

19 CHAIR: Okay, Jason. Thank you. Duly  
20 noted.

21 So we can move along with this, let's  
22 say what is PCA's position? In your mind, you have to  
23 get this fixed, do you have to open the chiropractic  
24 law, or can we just do a legislative agenda fix or a  
25 regulation fix? Please explain.

1                   MR. MARTIN: Well, we certainly  
2 discuss whether a fix with the regulation in and of  
3 itself, whether the State Board of Chiropractic alone  
4 could discuss, agree upon, and push forward  
5 regulations that would clear up the confusion,  
6 confusion or, in fact, the decision from the Cavoto  
7 case that no one expected. So certainly the State  
8 Board of Chiropractic could discuss, agree upon, and  
9 try to pass regulation that would potentially be able  
10 to give the chiropractors the authority to once again  
11 be able to delegate therapeutic exercise to unlicensed  
12 personnel. So that's a question that I think the  
13 State Board through their Counsel would have to  
14 discuss and consider amongst themselves. Since the  
15 Pennsylvania Chiropractic Association has absolutely  
16 no input in terms of those deliberations, we viewed  
17 this as what can we do in order to try to resolve the  
18 impact of the Cavoto decision for the members of the  
19 chiropractors for the Commonwealth of Pennsylvania.  
20 So it was discussed that a legislative fix is perhaps  
21 the only resolution that could achieve that purpose.  
22 So in order to provide a legislative fix, of course,  
23 the Chiropractic Practice Act is where you would have  
24 to turn in order to give the State Board the powers to  
25 pass regulations in terms of the examination and the

1 training and educational requirements that would be  
2 necessary for certification. So I don't know how the  
3 Pennsylvania Chiropractic Association could pursue any  
4 avenue or remedy except for a legislative change, you  
5 know, to the act.

6 CHAIR: Okay. Thank you.

7 Mr. Mowatt, does the Chiropractic  
8 Fellowship of Pennsylvania, do they feel that opening  
9 up the chiropractic law is a necessary, is necessary  
10 to fix this problem?

11 MR. MOWATT: Well, I guess our  
12 understanding of the court's ruling would, you know,  
13 and their focus on one line that's in the statute  
14 would say that if we want to change that, we have to  
15 change the statute, yes.

16 CHAIR: Okay.

17 Mr. Marshall, what is your thought  
18 about opening up the chiropractic law to fix that?

19 MR. MARSHALL: Yeah. I think that's  
20 the only way that that can be done is amending the  
21 act. And I would say I wasn't quite, my feelings  
22 weren't quite as hurt as apparently the Chiropractic  
23 Association when we referred to us as having a  
24 partnership. You know, we may not always be on the  
25 same page, but I would hope that at times, we can all

1 work together for changes in the law that might make  
2 patient care better.

3 CHAIR: Thank you for that comment,  
4 Mr. Marshall. Okay.

5 So we're going to move on. Kelsie  
6 Coats, if you have a question for, we'll start with  
7 the PCA, please ask a question.

8 DEPUTY COMMISSIONER CLAGGETT: Hello.  
9 Hey. I am the Deputy Commissioner for BPOA and I  
10 have joined this meeting as proxy for Commissioner  
11 Johnson. And I'd just like to say that we actually  
12 need to conclude this meeting at 2:30.

13 CHAIR: At what time?

14 DEPUTY COMMISSIONER CLAGGETT: By 2:30  
15 p.m.

16 CHAIR: Okay.

17 So then we'll allow another five  
18 minutes of questioning before we give everybody their  
19 final say because I assume the Chiropractic Fellowship  
20 of Pennsylvania, you don't - do you have a closing  
21 statement for us or will you just rest on the  
22 questions?

23 MR. MARTIN: I'm going -.

24 MR. YOUNG: We have - we -.

25 CHAIR: Go ahead.

1                   MR. MARTIN: The PCA has some closing  
2 remarks.

3                   CHAIR: All right.

4                   I assume the Insurance Federation  
5 does. So with the timeframe that we have, do we have  
6 - does the Chiropractic Fellowship of Pennsylvania, do  
7 you intend to utilize your final five minutes or will  
8 you just rest on answering questions?

9                   MR. MOWATT: We'll leave with where we  
10 are.

11                  CHAIR: Okay. Good. Okay.

12                  So we got another 4 minutes and 30  
13 seconds to go for the questions. So go ahead and ask  
14 that question.

15                  MS. COATS: Actually, I was going to  
16 say since we covered my question, I think a little bit  
17 with what we were just talking about, should we skip  
18 to maybe like the last question, which I think is -?

19                  CHAIR: Let's go ahead and do that.

20                  MS. COATS: - comprehensive?

21                  CHAIR: Ask away.

22                  MS. COATS: All right.

23                  So the PCA -.

24                  CHAIR: So this is for the PCA. This  
25 is for you, PCA. Go ahead.

1                   MS. COATS: Passive therapies or  
2 modalities have not been called into question. Are  
3 you aware that if the act is reviewed, those  
4 modalities could be impacted, meaning the scope of  
5 permissible duties for unlicensed supportive personnel  
6 could be further narrowed? Would you care to speak to  
7 the topic?

8                   CHAIR: Go ahead, PCA.

9                   MR. MARTIN: Well, our position is  
10 that the Cavoto decision made clear that passive  
11 modalities are not something that, are something that,  
12 you know, unlicensed individuals can do. Unlicensed  
13 in today's definition means someone who's not licensed  
14 or not certified because there is no such thing as  
15 certification. So in our view, there'd be no need to  
16 even discuss modalities in regards to any changes to  
17 the act because there's no need to. The purpose, the  
18 sole purpose of an amendment to the Act is to provide  
19 education and training so that certified assistants  
20 can assist with the therapeutic exercises. And to  
21 Sam's point, that would, we think, you know, support  
22 everyone's view that patient care and safety comes  
23 first, a certified program for the exercises would  
24 accomplish that. But in terms of the modalities,  
25 there's really nothing to discuss anymore because the



1 Cavoto decision made clear and the law, as it stands  
2 now, makes clear that unlicensed and uncertified  
3 personnel can do the modalities under the situation  
4 when a chiropractor is on premises and remains in  
5 control of the clinical decision-making, etcetera.

6 CHAIR: All right. Thank you.

7 Mr. Mowatt, do you have anything to  
8 add there?

9 MR. MOWATT: No, I don't, no.

10 CHAIR: Okay. Thank you.

11 Mr. Marshall, do you have anything to  
12 add to that question that was asked?

13 MR. MARSHALL: Yeah. There may be -  
14 this is - there may be some value in having, making  
15 sure that everybody understands at the outset just  
16 what are considered to be passive modalities. And I  
17 think the Physical Therapist Act, it has a list in  
18 terms in its regulations what unlicensed support  
19 personnel can do, and, you know, those passing  
20 modalities. And it goes to - you know, one thing I  
21 would recommend is that the physical therapy board be  
22 looped in on this so that it can offer some of its  
23 opinions, you know, since we're talking about  
24 mirroring their construct.

25 CHAIR: Okay. Thank you.

1                   So we'll start with the final five  
2 minute talk wrap-up. We'll start with the PCA. You  
3 have five minutes starting now to make your final,  
4 your final, you know, arguments.

5                   MR. YOUNG: Go ahead, Dr. Cianci.

6                   MR. CIANCI: Yes. Hello. My name is  
7 Chris Cianci. I've been in practice since 1993. My  
8 office is in Lansdale, PA and I'm the PCA's associate,  
9 PCA's delegate for the American Chiropractic  
10 Association. I've served as a district director for  
11 the PCA and the treasurer for the PCA. I've earned my  
12 credentials as a certified chiropractic sports  
13 practitioner and I'm qualified to sit for my Diplomate  
14 exam for the American Chiropractic Rehabilitation  
15 Board.

16                   Like many of my colleagues, I believe  
17 that chiropractic manipulation coupled with  
18 physiologic therapeutics such as corrective exercise  
19 is an important element in recovery from injuries to  
20 the musculoskeletal system. In general, therapeutic  
21 exercises help to support the adjustments by creating  
22 strong, correct movement patterns. These corrective  
23 exercises help to resolve improper biomechanics  
24 resulting in more normalized stresses on the human  
25 body.

1                   An examination is required to  
2 determine the need for therapeutic exercise. A  
3 typical scenario is a patient comes in with acute  
4 pain. Passive modalities, chiropractic manipulation  
5 are used to begin decreasing pain, increasing in the  
6 segmental range of motion, and decrease any soft  
7 tissue problems that may be involved. After a period  
8 of treatment time that is determined by the  
9 chiropractor, active care, such as therapeutic  
10 exercise will be incorporated into the treatment plan.  
11 Therapeutic exercises are generally done in a pain-  
12 free range of motion. They are fluid and that the  
13 chiropractor can change them as determined by the  
14 needs and tolerance of the patient.

15                   I use functional exercises in my  
16 office. The exercises are tailored to a specific  
17 patient's diagnosis and his or her abilities. They  
18 may include use of a stability ball, a wobble board,  
19 resistance bands, light dumbbells, yoga mats are used,  
20 or even TRX or suspension training as some of you may  
21 know it. In some treatment plans, a patient may be  
22 using all of these at some point in their active care.  
23 They may also incorporate a recumbent bicycle or a  
24 treadmill, if needed. As the patient progresses their  
25 care, the exercises become more challenging. When

1 care is complete, the patient will have the techniques  
2 to help them maintain the improvements they've gained  
3 in my office. They will be able to do the same  
4 exercises at home, but only when I am confident  
5 they're ready to do so.

6                   Benefits to the patient are multi-  
7 faceted. The patients recover more quickly. Just  
8 give me one moment. The patients will recover more  
9 fully and more quickly and be better able to resist  
10 similar injuries to themselves down the road. A  
11 typical lumbar rehab routine involves core  
12 strengthening and stabilization. This will be an  
13 integral part of their normal workout regimen for the  
14 rest of their lives. For some people, this is also  
15 the impetus they need to begin a regular exercise  
16 routine and get closer to a healthier body weight and  
17 a healthier lifestyle. Monitoring by a trained and  
18 certified chiropractic assistant allows the doctor to  
19 continue to treat other patients in the practice, thus  
20 providing optimal healthcare to his or her patients.  
21 The doctor is still on-site to answer any questions or  
22 make modifications as needed. The certified  
23 chiropractic assistant will be trained to recognize  
24 the possible need to modify a patient's exercise  
25 regimen and bring this information to the attention of

1 the treating chiropractor.

2                   A possible scenario is a patient is  
3 beginning his or her therapeutic exercise program, the  
4 CCA notices the patient is unable to progress to the  
5 next series of exercises without pain. The CCA brings  
6 that to the doctor's attention. The doctor can then  
7 take appropriate action, which may include decreasing  
8 range of motion or changing the exercise to something  
9 altogether different. This helps to, excuse me, this  
10 helps the process by ensuring the patient care is  
11 uninterrupted and effective.

12                   MR. YOUNG: Thank you. This is Chris  
13 Young again with the PCA. To reiterate, I would like  
14 to finish by stating that the PCA does support the  
15 legislation of the certified chiropractic assistant.  
16 Our three fundamentals of our position are number one,  
17 a doctor of chiropractic determines the plan of care  
18 and management. Number two, a certified chiropractic  
19 assistant is trained as set forth by our state board.  
20 Number three, a certified chiropractic assistant is  
21 under the direct on-premises supervision of a doctor  
22 of chiropractic. As always, the PCA offers its  
23 services and assistance to the state board. Thank  
24 you.

25                   CHAIR: You've got 30 seconds, PCA.

1 Anybody else?

2                   MR. MARTIN: Yeah. I just, you know,  
3 one of the final comments to Sam's point earlier and  
4 to one of the questions, with respect to the  
5 supervision requirements, we are currently looking to  
6 adopt something similar to what the PT's and PTA's  
7 have that would give the certified chiropractic  
8 assistant full autonomy without the chiropractor being  
9 on premises after a certain number of hours and other  
10 levels of advancement have been achieved. That's all  
11 I have. Thank you.

12                   CHAIR: Thank you. Okay.

13                   So I assume, Mr. Mowatt, you have  
14 nothing to add?

15                   MR. MOWATT: No need to hold this up  
16 any longer.

17                   CHAIR: Okay. Thank you.

18                   Mr. Marshall, Insurance Federation.  
19 Would you wrap it up for us with something that you  
20 think is important to leave with, the meeting with?

21                   MR. MARSHALL: Nothing to add beyond,  
22 you know, what was said to date in our written  
23 comments and here. But to reiterate that it does make  
24 sense that this board work in looping other boards  
25 that have similar issues on delegation to unlicensed

1 core personnel. Thank you.

2 CHAIR: Thank you. Okay.

3 So that concludes the informational  
4 meeting. I think it was very beneficial to us. I  
5 think it will be beneficial to the legislature. I  
6 think it will be beneficial to the State Board of  
7 Chiropractic Examiners when we review this. So I want  
8 to thank everyone who participated. Everyone was very  
9 professional. Everyone really represented  
10 professionally what should be the best profession and  
11 the interception of government, and profession. So I  
12 want to thank everybody's participation.

13 Ms. VanOrder, do you have anything to  
14 add?

15 MS. VANORDER: I do have just a couple  
16 of things. One, I put in the chat is just that if  
17 anyone was not able to announce themselves to go ahead  
18 and to write the State Board an email so we can  
19 include that in the transcript. Another item that I  
20 wanted to mention was there's been a lot of talk, and  
21 it seems a lot of agreement that there would need to  
22 be a change in the law to establish a type of  
23 chiropractic assistant. And in that case, there's a  
24 bill that - I know PCA had mentioned presenting a bill  
25 and if there are any others. There would need to be a

1 sunrise evaluation completed in order for the  
2 department to evaluate and establish a position on the  
3 legislation. So we can - the policy office can  
4 provide you with that sunrise application. I just  
5 wanted to put that out there while we were together.  
6 And that's all I have.

7 CHAIR: Okay.

8 So if - Ms. VanOrder, do you have  
9 anything else to add?

10 MS. VANORDER: I do not.

11 CHAIR: Okay.

12 Deputy Commissioner Mr. Claggett, do  
13 you have anything to add?

14 DEPUTY COMMISSIONER CLAGGETT: I do  
15 not. Thank you.

16 CHAIR: Okay.

17 So I will entertain a motion from the  
18 Board to adjourn from this meeting. Who would like to  
19 make that motion?

20 MR. AUKERMAN: William Aukerman. I'll  
21 make a motion to adjourn the meeting.

22 CHAIR: Dr. Aukerman has made a motion  
23 to adjourn the meeting. And do I have a second?

24 MS. COATS: Kelsie Coats, I second.

25 CHAIR: Okay.



1 Ms. Kelsie Coats has seconded. We can  
2 do this by acclimation. All in favor of the motion to  
3 adjourn this meeting, please say aye

4 ALL RESPOND AYE

5 CHAIR: I think the ayes have it.  
6 This meeting is now adjourned and thank everyone for  
7 their hard work on this from all parties. Thank you  
8 very much. We will certainly see you when we see you.  
9 Thank you.

10 \* \* \* \* \*

11 MEETING CONCLUDED AT 2:28 P.M.

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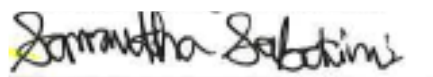
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CERTIFICATE

I hereby certify, as the stenographic reporter, that the foregoing proceedings were taken stenographically by me, and thereafter reduced to typewriting by me or under my direction; and that this transcript is a true and accurate record to the best of my ability.

Dated the 17 day of December 2021.



Samantha Sabatini,

Court Reporter