

June 3, 2015

TO: Commonwealth of Massachusetts, Division of Professional Licensure  
Board of Registration of Chiropractic Licensure

RE: changes to 233 CMR 2.00-5.00, the Rules and Regulations governing the registration and conduct of chiropractors.

Dear Director(s):

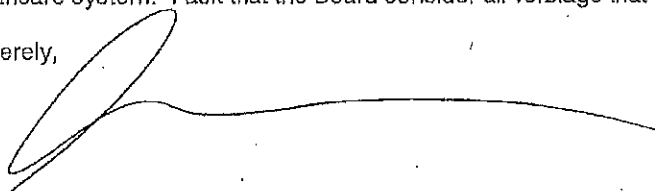
I wish for my concerns about chiropractic practice regulations in Massachusetts be heard by the Board.

Chiropractic final-term students seeking externships remain unable to provide care under supervision in a chiropractic facility in Massachusetts. This has no logical rationale, as no modern medical system would limit its students' ability to learn and provide better care to the public. This really needs to change.

Despite being a benefit on many health plans, chiropractic remains on the periphery of core medical care. Massachusetts regulations need to allow for expanded scope of practice for DCs so that we have a level playing field and can participate with ACOs. DCs with advanced training should be allowed to practice within the realm of that training. For example, DCs with adequate certification in acupuncture should be allowed to practice acupuncture or dry needling methods, just the same as it is for MDs and PTs.

MGL should contain statutes that foster evidence-guided, patient-centered doctors of chiropractic; statutes that pave the way for equality in medical decision-making, 3rd-party pay, and legislative affairs. This means eliminating any verbiage that pigeon-holes DCs as only being subluxation correctors [the subluxation-correction political scheme that was useful in the 1960s for our inclusion in Medicare now holds the profession hostage]. Expanded scope of practice is a means to migrate away from outdated and/or clinically flawed practice paradigm, while making DCs more valuable and useful in the healthcare system. I ask that the Board consider all verbiage that expands our scope of practice.

Sincerely,

  
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Dr. Scott F. Gillman  
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