# BOARD OF CHIROPRACTORS RULES

AS OF JUNE 30, 2021

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## DEPARTMENT OF LABOR AND INDUSTRY

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24-10003

#### **Organizational Rule**

24.126.101 BOARD ORGANIZATION (1) The Board of Chiropractors hereby adopts and incorporates the organizational rules of the Department of Labor and Industry as listed in chapter 1 of this title. (History: 37-12-201, MCA; <u>IMP</u>, 2-4-201, MCA, Eff. 12/31/72; <u>TRANS</u>, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; <u>TRANS</u>, from Commerce, 2003 MAR p. 2761.)

#### Procedural Rules

24.126.201 PROCEDURAL RULES (1) The Board of Chiropractors hereby adopts and incorporates the procedural rules of the Department of Labor and Industry as listed in chapter 2 of this title. (History: 37-12-201, MCA; <u>IMP</u>, 2-4-201, MCA, Eff. 12/31/72; <u>TRANS</u>, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; <u>TRANS</u>, from Commerce, 2003 MAR p. 2761.)

24.126.202 PUBLIC PARTICIPATION RULES (1) The Board of Chiropractors hereby adopts and incorporates by this reference the public participation rules of the Department of Commerce as listed in chapter 2 of this title. (History: 37-12-201, MCA; <u>IMP</u>, 2-3-103, MCA; <u>NEW</u>, 1980 MAR p. 3129, Eff. 12/27/80; <u>TRANS</u>, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; <u>TRANS</u>, from Commerce, 2003 MAR p. 2761.)

#### Definitions

<u>24.126.301 DEFINITIONS</u> (1) "Chaperone" as used in ARM 24.126.2301 means an individual delegated to ensure proper behavior on the part of the provider and the patient during the course of a physical examination or treatment.

(2) "Diagnostic x-ray" as used in 37-12-104, MCA, shall mean any recognized form of diagnostic imaging including, but not limited to, x-ray, CAT scan and MRI.

(3) "Dietetic methods" as used in 37-12-104, MCA, shall mean any service, when performed or ordered to be performed by any licensed chiropractor for therapeutic effects, which may employ recommending and/or giving of any food, vitamin, mineral, herb, enzyme, glandular product, homeopathic preparation, diet plan, or other nutritional substance not requiring a medical prescription.

(4) "New doc seminar" means a program provided by the board that is targeted to new licensees as a source of information on state laws and rules and other various topics. The program is open to all licensed chiropractors.

(5) "Physiotherapy" as used in 37-12-104, MCA, shall mean any service, when performed, or ordered to be performed, by any licensee, employing for therapeutic effects, physiological measures, activities, and devices for preventive and therapeutic purposes, physiological agents including, but not limited to, mechanical devices, heat, air, light, water, electricity, sound, exercise, rehabilitative procedures, massage, and mobilization, when performed for the purpose of diagnosis, evaluation, treatment, and instruction of the human body to detect, assess, correct, alleviate, prevent, and limit physical disability, injury, body malfunction, pain, mental condition by the aforementioned agents, or any other procedure taught in chiropractic colleges for the purpose of preventing, correcting, or alleviating a physiological or mental disability or condition. (History: 37-1-131, 37-1-319, 37-12-201, MCA; IMP, 37-1-131, 37-12-104, 37-12-201, MCA; NEW, 1990 MAR p. 995, Eff. 6/1/90; AMD, 1992 MAR p. 2131, Eff. 9/25/92; TRANS, from Commerce, 2003 MAR p. 2761; AMD, 2004 MAR p. 729, Eff. 4/9/04; AMD, 2006 MAR p. 1609, Eff. 6/23/06; AMD, 2009 MAR p. 2152, Eff. 11/13/09; AMD, 2012 MAR p. 503, Eff. 3/9/12; AMD, 2021 MAR p. 556, Eff. 5/15/21.)

#### **General Provisions**

24.126.401 FEE SCHEDULE	
(1) Application fee	\$300
(2) Reexamination fee of jurisprudence (written)	100
(3) Renewal fee	
(a) Active license	200
(b) Inactive license	100
(c) Impairment evaluator	25
(4) Temporary permit	100
(5) Application for impairment evaluators	250

(6) All fees are nonrefundable.

(7) Additional standardized fees are specified in ARM 24.101.403. (History: 37-1-134, 37-12-201, MCA; <u>IMP</u>, 37-1-134, 37-1-141, 37-12-201, 37-12-302, 37-12-304, MCA; <u>NEW</u>, 1990 MAR p. 1251, Eff. 6/15/90; <u>AMD</u>, 1990 MAR p. 1453, Eff. 7/27/90; <u>AMD</u>, 1994 MAR p. 2713, Eff. 10/14/94; <u>AMD</u>, 1996 MAR p. 2844, Eff. 10/25/96; <u>AMD</u>, 2000 MAR p. 1307, Eff. 5/26/00; <u>TRANS</u>, from Commerce, 2003 MAR p. 2761; <u>AMD</u>, 2004 MAR p. 729, Eff. 4/9/04; <u>AMD</u>, 2006 MAR p. 1609, Eff. 6/23/06; <u>AMD</u>, 2006 MAR p. 1583, Eff. 7/1/06; <u>AMD</u>, 2018 MAR p. 645, Eff. 3/31/18.)

<u>24.126.402 FEE ABATEMENT</u> (1) The Board of Chiropractors adopts and incorporates by reference the fee abatement rule of the Department of Labor and Industry found at ARM 24.101.301. (History: 37-1-131, MCA; <u>IMP</u>, 17-2-302, 17-2-303, 37-1-134, MCA; <u>NEW</u>, 2006 MAR p. 1609, Eff. 6/23/06; <u>AMD</u>, 2018 MAR p. 645, Eff. 3/31/18.)

24.126.403 PURPOSE OF THE BOARD (REPEALED) (History: 37-12-201, MCA; IMP, 37-12-104, MCA; Eff. 12/31/72; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; TRANS, from Commerce, 2003 MAR p. 2761; REP, 2004 MAR p. 729, Eff. 4/9/04.)

Rule 24.126.404 reserved

24.126.405 DEPARTMENT OF LABOR AND INDUSTRY

<u>24.126.405 BOARD MEETINGS</u> (REPEALED) (History: 37-12-201, MCA; <u>IMP</u>, 37-12-201, MCA; Eff. 12/31/72; <u>TRANS</u>, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; <u>TRANS</u>, from Commerce, 2003 MAR p. 2761; <u>REP</u>, 2016 MAR p. 733, Eff. 4/23/16.)

<u>24.126.406 RECORD OF MINUTES AND HEARINGS</u> (REPEALED) (History: 2-6-101, MCA; <u>IMP</u>, 2-6-101, MCA; Eff. 12/31/72; <u>TRANS</u>, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; <u>TRANS</u>, from Commerce, 2003 MAR p. 2761; <u>AMD</u>, 2008 MAR p. 1978, Eff. 9/12/08; <u>REP</u>, 2016 MAR p. 733, Eff. 4/23/16.)

Rules 24.126.407 through 24.126.410 reserved

<u>24.126.411 PATIENT RECORDS RETENTION</u> (1) Except as provided in ARM 24.126.2304, chiropractors must retain adult patient records and x-rays for a minimum of seven years and a minor patient's records and x-rays for a minimum of seven years from their last treatment or at least one year past their 18th birthday. (History: 37-1-131, MCA; <u>IMP</u>, 37-1-131, MCA; <u>NEW</u>, 2000 MAR p. 1307, Eff. 5/26/00; <u>TRANS</u>, from Commerce, 2003 MAR p. 2761; <u>AMD</u>, 2016 MAR p. 733, Eff. 4/23/16.)

<u>24.126.412 PREPAID TREATMENT PLANS</u> (1) Licensed chiropractors accepting prepayment for services planned, but not yet delivered must:

(a) Establish an escrow account to hold all prepayment funds.

(i) Funds may be removed from the escrow account following the delivery of services, in such amounts equal to the chiropractor's usual and customary charges for like services, with any discounted percentage contained in a written contract.

(ii) Funds received in advance of the day services are delivered must be deposited into the escrow account in a timely manner.

(b) Maintain a contract for prepayment of services. (History: 37-1-131, 37-1-319, 37-12-201, MCA; <u>IMP</u>, 37-1-131, 37-1-319, 37-12-201, MCA; <u>NEW</u>, 2011 MAR p. 380, Eff. 3/25/11.)

Rules 24.126.413 and 24.126.414 reserved

24.126.415 PARTICIPATION IN DISASTER AND EMERGENCY CARE --LIABILITY OF CHIROPRACTOR (1) A chiropractor licensed in this state, licensed or authorized to practice in another state, territory, or possession of the United States, or credentialed as a chiropractor by a federal employer who provides medical care response to an emergency or a federal, state, or local disaster may provide that care without supervision as required by this chapter or with whatever supervision is available. The provision of care allowed by this section is limited to the duration of the emergency or disaster.

(2) A chiropractor who supervises a temporary licensee in response to an emergency or disaster as described in (1) need not comply with the requirements of this chapter applicable to supervising chiropractors.

(3) A chiropractor referred to in (1) who voluntarily, gratuitously, and other than in the ordinary course of employment or practice renders emergency chiropractic care during an emergency or disaster described in (1) is not liable for civil damages for a personal injury resulting from an act or omission in providing that care if the injury is caused by simple or ordinary negligence and if the care is provided somewhere other than in a health care facility or a chiropractic office where those services are normally provided.

(4) A chiropractor who supervises a temporary licensee voluntarily and gratuitously providing emergency care at an emergency or disaster described in (1) is not liable for civil damages for a personal injury resulting from an act or omission in supervising the temporary licensee if the injury is caused by simple or ordinary negligence on the part of the temporary licensee providing the care or on the part of the supervising chiropractor. (History: 37-1-131, 37-12-201, MCA; <u>IMP</u>, 37-1-131, 37-12-104, 37-12-201, MCA; <u>NEW</u>, 2006 MAR p. 1609, Eff. 6/23/06.)

#### Licensing and Scope of Practice

<u>24.126.501 APPLICATIONS</u> (1) Applications not completed within one year of submission will be closed and the applicant must reapply.

(2) The department shall notify the applicant of the results of its evaluation of the application. (History: 37-1-131, 37-12-201, MCA; IMP, 37-1-131, 37-12-302, 37-12-304, MCA; Eff. 12/31/72; AMD, 1979 MAR p. 442, Eff. 5/11/79; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; AMD, 1982 MAR p. 6, Eff. 1/15/82; AMD, 1982 MAR p. 1540, Eff. 8/13/82; AMD, 1984 MAR p. 499, Eff. 3/30/84; AMD, 1986 MAR p. 201, Eff. 2/14/86; AMD, 1986 MAR p. 1182, Eff. 7/18/86; AMD, 1990 MAR p. 995, Eff. 6/1/90; AMD, 1990 MAR p. 1144, Eff. 6/15/90; AMD, 1992 MAR p. 2131, Eff. 9/25/92; AMD, 1994 MAR p. 1578, Eff. 6/10/94; AMD, 1994 MAR p. 2713, Eff. 10/14/94; AMD, 1996 MAR p. 2844, Eff. 10/25/96; AMD, 1998 MAR p. 1494, Eff. 6/12/98; TRANS, from Commerce, 2003 MAR p. 2761; AMD, 2006 MAR p. 1609, Eff. 6/23/06; AMD, 2018 MAR p. 1978, Eff. 9/12/08; AMD, 2009 MAR p. 2152, Eff. 11/13/09; AMD, 2018 MAR p. 645, Eff. 3/31/18.)

<u>24.126.502 MILITARY TRAINING OR EXPERIENCE</u> (1) Pursuant to 37-1-145, MCA, the board shall accept relevant military training, service, or education toward the requirements for licensure as a chiropractor.

(2) Relevant military training, service, or education must be completed by an applicant while a member of either:

- (a) United States Armed Forces;
- (b) United States Reserves;
- (c) state national guard; or
- (d) military reserves.

(3) An applicant must submit satisfactory evidence of receiving military training, service, or education that is equivalent to relevant licensure requirements as a chiropractor. Satisfactory evidence includes:

(a) a copy of the applicant's military discharge document (DD 214 or other discharge documentation);

(b) a document that clearly shows all relevant training, certification, service, or education the applicant received while in the military, including dates of training and completion or graduation; and

(c) any other documentation as required by the board.

(4) The board shall consider all documentation received to determine whether an applicant's military training, service, or education is equivalent to relevant licensure requirements. (History: 37-1-145, MCA; <u>IMP</u>, 37-1-145, MCA; <u>NEW</u>, 2014 MAR p. 854, Eff. 4/25/14; <u>AMD</u>, 2018 MAR p. 645, Eff. 3/31/18.)

Rule 24.126.503 reserved

<u>24.126.504 LICENSE BY EXAMINATION</u> (1) Applicants for chiropractic licensure by examination must apply on forms provided by the department, accompanied by the appropriate fee per ARM 24.126.401, and submit the following:

(a) official transcripts sent directly from the educational institution to demonstrate the applicant achieved:

(i) a minimum of a bachelor's degree from an accredited college or university, except as provided in 37-12-302(3), MCA; and

(ii) graduation from a chiropractic college accredited by the Council on Chiropractic Education (CCE) or another accrediting body in good standing with the Council on Chiropractic Education International (CCEI);

(b) results of the national board examination (Part I, II, III, and IV, and physiotherapy) sent directly from the National Board of Chiropractic Examiners (NBCE);

(c) verification of licensure sent directly from all states in which the applicant has held or holds a license; and

(d) an original, unopened self-query of the National Practitioner Databank (NPDB).

(2) Applicants must also pass the state jurisprudence examination with a minimum score of 75 percent. (History: 37-1-131, 37-12-201, MCA; IMP, 37-1-131, 37-12-304, MCA; Eff. 12/31/72; AMD, 1979 MAR p. 442, Eff. 5/11/79; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; AMD, 1982 MAR p. 1540, Eff. 8/13/82; AMD, 1983 MAR p. 1247, Eff. 9/16/83; AMD, 1988 MAR p. 44, Eff. 1/15/88; AMD, 1990 MAR p. 995, Eff. 6/1/90; AMD, 1992 MAR p. 2131, Eff. 9/25/92; AMD, 1996 MAR p. 2844, Eff. 10/25/96; AMD, 1998 MAR p. 1494, Eff. 6/12/98; AMD, 2000 MAR p. 1307, Eff. 5/26/00; TRANS, from Commerce, 2003 MAR p. 2761; AMD, 2008 MAR p. 1978, Eff. 9/12/08; AMD, 2018 MAR p. 645, Eff. 3/31/18.)

<u>24.126.505</u> NONROUTINE APPLICATIONS (1) For the purpose of processing nonroutine applications, the board incorporates the definitions of routine and nonroutine at ARM 24.101.402 by reference.

(2) Nonroutine applications must be reviewed and approved by the board before a license may be issued. (History: 37-1-131, MCA; <u>IMP</u>, 37-1-101, 37-1-131, MCA; <u>NEW</u>, 2021 MAR p. 556, Eff. 5/15/21.)

24.126.506 APPLICANTS WITH CRIMINAL CONVICTIONS (1) The board incorporates ARM 24.101.406 by reference with no modifications. (History: 37-1-131, MCA; IMP, 37-1-101, 37-1-131, MCA; NEW, 2021 MAR p. 556, Eff. 5/15/21.)

<u>24.126.507 TEMPORARY PERMIT</u> (1) Temporary permit applicants may be issued a permit under 37-1-305, MCA, while waiting to take either Part IV of the NBCE or the Special Purposes Examination for Chiropractors (SPEC). The permit shall require the permit holder to practice under the on-premises supervision of a chiropractor licensed in the state of Montana.

(2) A temporary permit applicant must take and pass the jurisprudence exam by a minimum of 75 percent before a temporary permit will be granted.

(3) A temporary permit holder may not sign insurance claims, workers' compensation claims, Medicare/Medicaid claims, or birth or death certificates. Only licensed practitioners have this authority.

(4) A statement consenting to the above conditions shall be signed by both the supervising licensed chiropractor and the applicant, and filed with the department.

(5) Any advertisement where the temporary permit holder is named or pictured must state that the individual holds a temporary permit and if applicable, must include the designation, "intern." This designation must appear with the name of the supervising licensed chiropractor. (History: 37-1-131, 37-1-319, MCA; IMP, 37-1-131, 37-1-305, 37-1-319, MCA; Eff. 12/31/72; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; <u>AMD</u>, 1982 MAR p. 1540, Eff. 8/13/82; <u>AMD</u>, 1990 MAR p. 995, Eff. 6/1/90; <u>AMD</u>, 1996 MAR p. 2844, Eff. 10/25/96; <u>AMD</u>, 1998 MAR p. 1494, Eff. 6/12/98; <u>AMD</u>, 2000 MAR p. 1307, Eff. 5/26/00; <u>TRANS</u>, from Commerce, 2003 MAR p. 2761; <u>AMD</u>, 2006 MAR p. 1609, Eff. 6/23/06; <u>AMD</u>, 2008 MAR p. 1978, Eff. 9/12/08; <u>AMD</u>, 2018 MAR p. 645, Eff. 3/31/18.)

Rules 24.126.508 and 24.126.509 reserved

<u>24.126.510 LICENSE BY ENDORSEMENT</u> (1) The board will issue a chiropractic license to applicants licensed in another state upon determining that the other state's license standards are substantially equal to or greater than Montana's.

(2) Applicants for chiropractic licensure by endorsement must apply on forms provided by the department, accompanied by the appropriate fee, and submit the following:

(a) official transcripts sent directly from the educational institution to demonstrate the applicant achieved:

(i) a minimum of a bachelor's degree from an accredited college or university, except as provided in 37-12-302(3), MCA; and

(ii) graduation from a chiropractic college accredited by the Council on Chiropractic Education (CCE) or another accrediting body in good standing with the Council on Chiropractic Education International (CCEI);

(b) results of the national board examination (Part I, II, III, and IV, and physiotherapy) sent directly from the National Board of Chiropractic Examiners (NBCE);

(c) verification of licensure sent directly from all states in which the applicant has held or holds a license; and

(d) an original, unopened self-query of the National Practitioner Databank (NPDB).

(3) Endorsement applications with inequivalent standards will be reviewed by the board.

(4) If the board determines the license standards are not substantially equivalent, the board may require successful passage of the SPEC examination administered by the NBCE for licensure.

(5) All applicants must also pass the state jurisprudence examination with a minimum score of 75 percent. (History: 37-1-131, MCA; <u>IMP</u>, 37-1-131, 37-1-304, MCA; <u>NEW</u>, 1998 MAR p. 1494, Eff. 6/12/98; <u>TRANS</u>, from Commerce, 2003 MAR p. 2761; <u>AMD</u>, 2006 MAR p. 1609, Eff. 6/23/06; <u>AMD</u>, 2008 MAR p. 1978, Eff. 9/12/08; <u>AMD</u>, 2011 MAR p. 380, Eff. 3/25/11; <u>AMD</u>, 2018 MAR p. 645, Eff. 3/31/18.)

<u>24.126.511 DISPLAY OF LICENSE</u> (1) Licensees shall display or present proof of current licensure upon request of department personnel or members of the public. (History: 37-1-131, 37-12-201, MCA; <u>IMP</u>, 37-1-131, 37-12-201, MCA; <u>NEW</u>, 2004 MAR p. 729, Eff. 4/9/04; <u>AMD</u>, 2006 MAR p. 1609, Eff. 6/23/06; <u>AMD</u>, 2009 MAR p. 2152, Eff. 11/13/09; <u>AMD</u>, 2018 MAR p. 645, Eff. 3/31/18.)

Rules 24.126.512 through 24.126.514 reserved

<u>24.126.515 DRY NEEDLING</u> (1) Dry needling is a skilled technique performed using a mechanical device, filiform needle(s), to penetrate the skin and/or underlying tissues as a treatment method to manipulate tissues of the body for the correction of nerve interference.

(2) Dry needling requires a chiropractic examination and diagnosis.

(3) To perform dry needling, chiropractors must have completed training in dry needling.

(a) Dry needling training shall include, but not be limited to, training in the following areas:

(i) indications;

(ii) contraindications;

(iii) potential risks;

(iv) proper hygiene;

(v) proper use and disposal of needles.

(b) To perform dry needling, chiropractors must have completed training in dry needling affiliated with or approved by:

(i) national, regional, or state chiropractic associations;

- (ii) state licensing boards;
- (iii) academies;
- (iv) colleges of chiropractic; or

(v) the Federation of Chiropractic Licensure Board (FCLB) Providers of Approved Continuing Education (PACE).

(c) Initial training in dry needling must include hands-on training.

(4) A chiropractor shall perform dry needling in a manner consistent with generally accepted standards of practice, including relevant standards of the Center for Disease Control and Prevention, and Occupational Safety and Health Administration blood borne pathogen standards as per 29 CFR 1910.1030 et. seq.

(5) Dry needling shall only be performed by a chiropractor and may not be delegated.

(6) Chiropractors performing dry needling must maintain proof of appropriate training as required by this rule. Failure to provide proof of training upon the board's request may result in disciplinary action. (History: 37-1-131, 37-12-201, MCA; <u>IMP</u>, 37-1-131, 37-12-101, 37-12-104, MCA; <u>NEW</u>, 2020 MAR p. 1737, Eff. 9/26/20.)

Subchapter 6 reserved

# Licensing and Board Specific Rules

## 24.126.701 INACTIVE STATUS AND CONVERSION TO ACTIVE STATUS

(1) Licensees may obtain an inactive status chiropractic license upon submission of an application. While on inactive status, chiropractors may not practice chiropractic in Montana.

(2) To convert to active status, inactive licensees must submit an application, pay the required renewal fee, and provide evidence that:

(a) all chiropractic licenses currently held in other jurisdictions are unrestricted with no pending discipline, and proof of either:

(i) having practiced full-time (no less than 1500 hours each year on inactive status) under a chiropractic license in good standing in another state that requires continuing education substantially equivalent to that required in Montana; or

(ii) completion of 12 hours of approved continuing education in the year preceding the conversion. (History: 37-1-131, 37-1-319, MCA; <u>IMP</u>, 37-1-131, 37-1-319, MCA; <u>NEW</u>, 1987 MAR p. 1343, Eff. 8/14/87; <u>AMD</u>, 1996 MAR p. 2844, Eff. 10/25/96; <u>TRANS</u>, from Commerce, 2003 MAR p. 2761; <u>AMD</u>, 2006 MAR p. 1609, Eff. 6/23/06; <u>AMD</u>, 2008 MAR p. 1978, Eff. 9/12/08; <u>AMD</u>, 2011 MAR p. 380, Eff. 3/25/11; <u>AMD</u>, 2013 MAR p. 1982, Eff. 11/1/13; <u>AMD</u>, 2018 MAR p. 645, Eff. 3/31/18.)

Rules 24.126.702 and 24.126.703 reserved

<u>24.126.704</u> INTERN AND PRECEPTOR REGISTRATION (1) Prior to acting as a preceptor to interns, licensees must register all interns with the board. (History: 37-12-201, MCA; IMP, 37-12-201, MCA; NEW, 1994 MAR p. 2713, Eff. 10/14/94; AMD, 2000 MAR p. 1307, Eff. 5/26/00; TRANS, from Commerce, 2003 MAR p. 2761; AMD, 2006 MAR p. 1609, Eff. 6/23/06; AMD, 2008 MAR p. 1978, Eff. 9/12/08; AMD, 2012 MAR p. 503, Eff. 3/9/12; AMD, 2018 MAR p. 645, Eff. 3/31/18.)

Subchapter 8 reserved

#### Impairment Evaluators

## 24.126.901 APPLICATIONS FOR CERTIFICATION OF IMPAIRMENT

<u>EVALUATORS</u> (1) Any licensed chiropractor desiring to be certified as an impairment evaluator to rate impairments of workers' compensation claimants or insurers shall file an application with the board.

(2) Applicants shall have been in active clinical practice in Montana for a minimum of 12 consecutive months, immediately preceding application.

(3) Applicants may qualify for certification by:

(a) successfully completing a board-approved program for education and training of certified chiropractic impairment evaluators, and passing the associated exam with a minimum of 75 percent; or

(b) successfully completing an educational and training program relating to chiropractic orthopedics, impairment ratings, or similar course work from a Council on Chiropractic Education (CCE) status chiropractic college or any other college or university approved by the board, and passing the associated exam with a minimum of 75 percent; or

(c) by being in practice for more than five years and successfully demonstrating to the board that the applicant has completed a certified program equal to that recommended by the board.

(4) Diplomates of the American Board of Chiropractic Orthopedists (DABCO) in practice more than five years are exempt from the educational and training requirements.

(5) Applications shall be accompanied by official transcripts, diplomas, or similar certificates evidencing successful completion of one of the types of education and training programs approved by the board. Successful completion is deemed written certification by the course provider. (History: 37-12-201, MCA; <u>IMP</u>, 37-12-201, MCA; <u>NEW</u>, 1990 MAR p. 1453, Eff. 7/27/90; <u>AMD</u>, 1996 MAR p. 2844, Eff. 10/25/96; <u>TRANS</u>, from Commerce, 2003 MAR p. 2761; <u>AMD</u>, 2008 MAR p. 1978, Eff. 9/12/08; <u>AMD</u>, 2009 MAR p. 2152, Eff. 11/13/09; <u>AMD</u>, 2012 MAR p. 503, Eff. 3/9/12.)

Rules 24.126.902 and 24.126.903 reserved

24.126.904 DEPARTMENT OF LABOR AND INDUSTRY

24.126.904 MINIMUM REQUIREMENTS FOR BOARD-APPROVED PROGRAMS TO QUALIFY FOR CERTIFICATION AS AN IMPAIRMENT EVALUATOR (1) In order to qualify for board approval, programs shall include a minimum of 36 hours of classroom course work consisting of 24 hours of education in impairment rating from a college certified by the Council on Chiropractic Education, and 12 hours in a course on impairment rating utilizing the current edition of the Guides to Evaluation of Permanent Impairment published by the American Medical Association. (History: 37-1-131, 37-12-201, MCA; IMP, 37-1-131, 37-12-201, 37-71-711, MCA; NEW, 1990 MAR p. 1453, Eff. 7/27/90; AMD, 1996 MAR p. 3212, Eff. 10/25/96; TRANS, from Commerce, 2003 MAR p. 2761; AMD, 2008 MAR p. 1978, Eff. 9/12/08; AMD, 2011 MAR p. 380, Eff. 3/25/11.)

Rules 24.126.905 and 24.126.906 reserved

24.126.907 APPROVAL OF TRAINING PROGRAMS FOR IMPAIRMENT EVALUATORS (1) Applications for approval of training programs for impairment evaluators shall be made by letter with supporting documents and must demonstrate to the satisfaction of the board that such programs fulfill the requirements of the board.

(2) The supporting documents must include a syllabus or program outline specifying the classroom hours for each segment of the program, a vitae of each instructor and the method to be employed in monitoring attendance.

(3) In evaluating proposed training programs, the board may investigate and make personal inspections, or delegate to one or more of its members or any other duly qualified persons the authority to make such investigations and inspections for the board. Such investigations and inspections will be at the expense of the program sponsors.

(4) When the training program is approved, the board will issue a letter of approval for the training program for a period of two years.

(5) Approval of a program may be withdrawn when the board finds that the program fails to maintain the educational standards set forth in the original application. (History: 37-12-201, MCA; <u>IMP</u>, 37-12-201, MCA; <u>NEW</u>, 1990 MAR p. 1453, Eff. 7/27/90; <u>TRANS</u>, from Commerce, 2003 MAR p. 2761; <u>AMD</u>, 2008 MAR p. 1978, Eff. 9/12/08.)

Rules 24.126.908 and 24.126.909 reserved

<u>24.126.910 IMPAIRMENT EVALUATOR STANDARDS</u> (1) A minimum of four hours of specialized continuing education (CE) relevant to impairment evaluation shall be obtained every four years.

(a) These hours shall be in addition to the CE required for the underlying chiropractic license.

(b) CE approved by the board must directly relate to impairment evaluation and shall be affiliated with national, regional, or state chiropractic associations, state licensing boards, academies, colleges of chiropractic, or education approved by the Federation of Chiropractic Licensure Board (FCLB) Providers of Approved Continuing Education (PACE).

(c) The department shall conduct a random audit of impairment evaluator certificate holders every four years to verify compliance with the requirements.

(d) A three-month extension will be provided for all licensees who fail to meet the continuing education requirements as a result of an audit. Failure to meet this extension may result in disciplinary action.

(e) Any impairment evaluator seeking a hardship waiver from the CE requirements shall apply to the board, in writing, as soon as possible after the hardship is identified and prior to the end of the period for completing the continuing education.

(i) Specific details of the hardship must be included.

(ii) The board must find that a hardship exists.

(iii) The waiver may be absolute or conditional.

(2) Persistent deviation from generally accepted standards for impairment evaluation may be grounds for disciplinary action, which may include revocation of the impairment evaluator certificate.

(3) Impairment evaluators must comply with ARM 24.29.1415. This rule is available at www.mtrules.org.

(4) Impairment evaluator licenses shall be renewed annually. (History: 37-1-131, 37-1-319, 37-12-201, MCA; <u>IMP</u>, 37-1-131, 37-1-306, 37-1-319, 37-12-201, MCA; <u>NEW</u>, 1990 MAR p. 1453, Eff. 7/27/90; <u>AMD</u>, 2000 MAR p. 1499, Eff. 5/26/00; <u>TRANS</u>, from Commerce, 2003 MAR p. 2761; <u>AMD</u>, 2006 MAR p. 1609, Eff. 6/23/06; <u>AMD</u>, 2008 MAR p. 1978, Eff. 9/12/08; <u>AMD</u>, 2009 MAR p. 2152, Eff. 11/13/09; <u>AMD</u>, 2018 MAR p. 645, Eff. 3/31/18.)

Subchapters 10 through 20 reserved

CHIROPRACTORS

#### Subchapter 21

#### Renewals and Continuing Education

<u>24.126.2101 RENEWALS</u> (REPEALED) (History: 37-1-131, 37-12-201, MCA; <u>IMP</u>, 37-1-131, 37-1-141, MCA; Eff. 12/31/72; <u>AMD</u>, 1979 MAR p. 442, Eff. 5/11/79; <u>AMD</u>, 1979 MAR p. 1302, Eff. 10/16/79; <u>TRANS</u>, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; <u>AMD</u>, 1982 MAR p. 6, Eff. 1/15/82; <u>AMD</u>, 1983 MAR p. 1247, Eff. 9/16/83; <u>AMD</u>, 1984 MAR p. 499, Eff. 3/30/84; <u>AMD</u>, 1986 MAR p. 1182, Eff. 7/18/86; <u>AMD</u>, 1987 MAR p. 1343, Eff. 8/14/87; <u>AMD</u>, 1990 MAR p. 995, Eff. 6/1/90; <u>AMD</u>, 1990 MAR p. 1144, Eff. 6/15/90; <u>AMD</u>, 1994 MAR p. 1578, Eff. 6/10/94; <u>AMD</u>, 1996 MAR p. 3212, Eff. 10/25/96; <u>AMD</u>, 1998 MAR p. 1494, Eff. 6/12/98; <u>AMD</u>, 2000 MAR p. 1307, Eff. 5/26/00; <u>TRANS</u>, from Commerce, 2003 MAR p. 2761; <u>AMD</u>, 2006 MAR p. 1609, Eff. 6/23/06; <u>AMD</u>, 2006 MAR p. 1583, Eff. 7/1/06; <u>AMD</u>, 2008 MAR p. 1978, Eff. 9/12/08; <u>AMD</u>, 2012 MAR p. 503, Eff. 3/9/12; <u>REP</u>, 2016 MAR p. 733, Eff. 4/23/16.)

Rule 24.126.2102 reserved

24.126.2103 CONTINUING EDUCATION REQUIREMENTS (1) Active licensees shall affirm an understanding of the duty to complete a minimum of 12 hours of continuing education (CE) during each renewal period per ARM 24.101.413.

(2) Licensees shall complete four hours of CE in professional boundaries and ethics every four-year reporting period. These hours shall be in addition to and not count toward the 12 hours of CE required each renewal period.

(3) New licensees shall:

(a) complete 12 hours of CE between the date of original Montana licensure and the end of the first full renewal period; and

(b) affirm their understanding of the requirement on the second renewal application.

(4) Licensees converting from inactive to active status shall comply with the CE requirements of ARM 24.126.701.

(5) The board may randomly audit up to 50 percent of renewed licensees.

(6) CE hours cannot be accumulated and carried over from one renewal period to the next.

(7) Licensees found to be in noncompliance with CE requirements may be subject to administrative suspension.

(8) A licensee may request an exemption from CE requirements due to hardship. Requests will be considered by the board. (History: 37-1-131, 37-1-319, MCA; <u>IMP</u>, 37-1-131, 37-1-141, 37-1-306, 37-1-319, 37-1-321, MCA; <u>NEW</u>, 2008 MAR p. 1978, Eff. 9/12/08; <u>AMD</u>, 2012 MAR p. 503, Eff. 3/9/12; <u>AMD</u>, 2013 MAR p. 1982, Eff. 11/1/13; <u>AMD</u>, 2016 MAR p. 733, Eff. 4/23/16; <u>AMD</u>, 2018 MAR p. 645, Eff. 3/31/18; <u>AMD</u>, 2020 MAR p. 1737, Eff. 9/26/20.)

Rule 24.126.2104 reserved

<u>24.126.2105</u> ACCEPTABLE CONTINUING EDUCATION (1) Acceptable continuing education (CE) must directly relate to the practice of chiropractic and be affiliated with or approved by:

(a) national, regional, or state chiropractic associations;

(b) state licensing boards;

(c) academies;

(d) colleges of chiropractic; or

(e) the Federation of Chiropractic Licensure Board (FCLB) Providers of Approved Continuing Education (PACE).

(2) From the date of original licensure in Montana until the end of the first full renewal period, new licensees can fulfill the 12-hour CE requirement by attending one session of the "new doc seminar."

(3) A maximum of two hours can be in philosophy and/or practice management.

(4) Licensees can receive two credits for each chiropractic board meeting attended.

(5) Internet courses must meet the same CE guidelines.

(6) CE courses considered outside the scope of practice for Montana chiropractors are not acceptable. (History: 37-1-131, 37-1-319, MCA; <u>IMP</u>, 37-1-131, 37-1-141, 37-1-306, 37-1-319, MCA; <u>NEW</u>, 2008 MAR p. 1978, Eff. 9/12/08; <u>AMD</u>, 2012 MAR p. 503, Eff. 3/9/12; <u>AMD</u>, 2016 MAR p. 733, Eff. 4/23/16; <u>AMD</u>, 2018 MAR p. 645, Eff. 3/31/18; <u>AMD</u>, 2020 MAR p. 1737, Eff. 9/26/20.)

Subchapter 22 reserved

# **Unprofessional Conduct**

<u>24.126.2301</u> UNPROFESSIONAL CONDUCT (1) For the purpose of implementing the provisions of 37-1-316, MCA, the board further defines unprofessional conduct as follows:

(a) any representations to patients or prospective patients, whether communicated verbally, by advertisement, or through any other medium, that contains misstatements, falsehoods, distorted or fabulous statements, relative to:

(i) diagnosis, palpation, treatment, cure, or cost of services;

(ii) a fellow licensee, including statements which imply superiority over another licensee or health care professional; or

(iii) the licensee's particular abilities, qualifications, experience, features, or accomplishments regarding the licensee or the licensee's chiropractic practice.

(b) violating any provision of ARM 24.126.2304 regarding sexual misconduct or sexual relations with a patient;

(c) violating any state or federal statute or administrative rule regulating the practice of chiropractic including any statute or rule defining or establishing standards of patient care or professional conduct of practice;

(d) engaging in, or being involved in, "fee splitting" in which a licensee gives or receives payments or fees in referral of a patient to any professional or company offering payment in exchange for referrals to their products or services;

(e) soliciting or accepting, for services rendered, assigned payments from any third-party payer as payment in full, if the effect is to eliminate the need of payment by the patient of any required deductible or co-payment applicable on the patient's health benefit plan, except as hereinafter provided;

(f) billing charges or fees to a third-party payer or collecting from a thirdparty payer on behalf of a patient at a different rate than the charge or fee actually billed to or collected from the patient. In the case where services are provided at a reduced rate to a patient, any charge or fee billed to or collected from a third party must be based upon the actual reduced rate billed to the patient;

(g) engaging in, or providing services or treatments which are in excess of those warranted by either the patients' condition and response or the practice technique, methodology, or modality applied and are not consistent with the seriousness of diagnosis;

(h) participating in, or conducting, research projects on patients or the public without first obtaining written authorization from the board;

(i) failing to make reports and records available to the board upon request, failure to cooperate with a board investigation or knowingly giving false information to the board;

(j) performing an examination, chiropractic manipulation, or adjustment intravaginally;

(k) performing an adjustment intrarectally unless the following conditions are met:

(i) a written consent form is signed by the patient for each adjustment. The consent form must clearly offer external adjustment options;

(ii) the intra-rectal adjustment must be diagnosis related;

(iii) the adjustment is performed with the use of a disposable finger cot or rubber glove; and

(iv) a chaperone is present at all times the patient is examined and treated intrarectally.

(I) falsifying, altering, or making incorrect essential entries or failing to make essential entries of patient records;

(m) violating any state, federal, provincial, or tribal statute or administrative rule governing or affecting the professional conduct of any licensee;

(n) providing professional services while impaired by dangerous drugs or controlled substances;

(o) failing to obtain an appropriate consultation or make an appropriate referral when the problem of the patient is beyond the licensee's training, experience or competence;

(p) failing to render adequate supervision, management, training, or control of auxiliary staff or other persons, including preceptors, temporary permit holders, and/or licensees practicing under the licensee's supervision or control according to generally accepted standards of practice;

(q) failing to cooperate with a board inspection or investigation in any material respect; or

(r) failing to keep adequate patient records that are legible and contain at a minimum:

(i) date of service;

- (ii) pertinent history;
- (iii) relevant symptomotology;
- (iv) physical findings;
- (v) results of diagnostic tests;
- (vi) clinical assessment;
- (vii) treatment procedures; and
- (viii) patient progress.

(s) entering into a contract which would obligate a patient to pay for care to be rendered in the future, unless the contract provides that the patient is entitled to a complete refund for any care not received within a reasonable amount of time;

(t) charging or collecting a clearly excessive fee. In determining if a fee is clearly excessive the board shall consider the fee or range of fees customarily charged in the state for similar services in light of modifying factors such as the time required, the complexity of the service, and the skill requisite to perform the service properly. This subdivision does not apply if there is a clear written contract for a fixed fee between the physician and the patient that has been entered into before the service was provided;

(u) engaging in the practice of chiropractic when the licensee's license is inactive, has expired, or has been suspended or revoked. (History: 37-1-131, 37-1-319, 37-12-201, MCA; IMP, 37-1-131, 37-1-141, 37-1-316, 37-1-319, 37-12-301, 37-12-322, MCA; Eff. 12/31/72; TRANS, from Dept. of Prof. & Occup. Lic., Ch. 274, L. 1981, Eff. 7/1/81; AMD, 1988 MAR p. 475, Eff. 3/11/88; AMD, 1990 MAR p. 995, Eff. 6/1/90; AMD, 1994 MAR p. 1578, Eff. 6/10/94; AMD, 1998 MAR p. 1494, Eff. 6/12/98; AMD, 2000 MAR p. 1307, Eff. 5/26/00; TRANS, from Commerce, 2003 MAR p. 2761; AMD, 2004 MAR p. 729, Eff. 4/9/04; AMD, 2008 MAR p. 1978, Eff. 9/12/08; AMD, 2009 MAR p. 2152, Eff. 11/13/09; AMD, 2016 MAR p. 733, Eff. 4/23/16.)

Rules 24.126.2302 through 24.126.2303 reserved

<u>24.126.2304</u> SEXUAL RELATIONS WITH A PATIENT AND SEXUAL <u>MISCONDUCT</u> (1) A licensee shall not solicit, engage, or attempt to engage, in any form of sexual relationship or sexual contact with a current patient, unless the sexual relationship or sexual contact was consensual and occurred or commenced prior to the chiropractor-patient relationship.

(2) A licensee shall not solicit, engage, or attempt to engage, in any form of sexual relationship or sexual contact with a former patient, unless the chiropractorpatient relationship is terminated in writing and more than 90 days have passed since the chiropractor-patient relationship terminated. The licensee must permanently retain written record of the terminated chiropractor-patient relationship to demonstrate compliance with this section.

(3) A licensee shall not solicit, engage, or attempt to engage, in verbal or physical sexual harassment, sexual contact, or sexual exploitation, against any person when working in the chiropractic practice or business, or under the guise of providing chiropractic services.

(4) Without regard to a licensee's or applicant's mental intent, a licensee or applicant shall not engage in any conduct defined as a sexual crime in 45-5-501 through 45-5-507, MCA, regardless of whether the conduct occurred in or is related to the licensee's chiropractic practice.

(5) For the purpose of this rule, "sexual contact," "sexual intercourse," and "solicit" or "solicitation" are defined in 45-2-101, MCA; and "without consent" is defined in 45-5-501, MCA.

(6) A licensee's or applicant's violation of this rule constitutes unprofessional conduct pursuant to ARM 24.126.2301(1)(b). (History: 37-1-131, 37-1-319, MCA; <u>IMP</u>, 37-1-131, 37-1-316, 37-1-319, MCA; <u>NEW</u>, 2016 MAR p. 733, Eff. 4/23/16.)