


NATE GUSTAFSON

STATE REPRESENTATIVE • 55TH ASSEMBLY DISTRICT

Testimony in Support of Assembly Bill 830

Assembly Committee on Health, Aging and Long-Term Care

Wednesday, January 17, 2024

Thank you, Chairman Moses, and esteemed members of the Assembly Committee on Health, Aging and Long-Term Care, for scheduling this public hearing and providing me with the opportunity to testify in favor of Assembly Bill 830. I also want to express my appreciation to my colleague, Senator Cabral-Guevara, for her leadership on this bill in the Senate.

Medical Assistants, who primarily work in hospital settings, provide adjunctive services to both physicians and chiropractors. These “adjunctive services” include the taking and preparation of a preliminary patient history and providing physiotherapy treatment. Currently, a Medical Assistant must obtain a Chiropractic Technician certification from the Wisconsin Chiropractic Examining Board.

This bill eliminates the requirement that Medical Assistants obtain a redundant Chiropractic Technician certification in order to provide adjunctive services at the direction of a chiropractor provided they were trained by an education program accredited by the National Commission for Certifying Agencies.

I urge you to vote for Assembly Bill 830. Your careful attention to this matter is greatly appreciated, and I trust that you will recognize the positive impact Assembly Bill 830 can have on our constituents and our state as a whole.

Thank you for your time and consideration.



RACHAEL A. CABRAL-GUEVARA

STATE SENATOR • 19TH SENATE DISTRICT

Testimony before the Assembly Committee on Health, Aging and Long-Term Care

Senator Rachael Cabral-Guevara

January 17, 2024

Thank you committee members for allowing me to testify today on Assembly Bill 830. The bill in front of you today adds a simple tool allowing Medical Assistants (MAs) to perform delegated functions without the need to receive a redundant certification.

Currently, licensed chiropractors in Wisconsin can delegate services that are preparatory or complementary to the practice of chiropractic to other licensed health care professionals provided those services are within the other provider's scope of practice and they have the training and experience. These "adjunctive services" include the taking and preparation of a preliminary patient history and providing physiotherapy treatment.

Medical Assistants (MAs), who primarily work in hospital settings, provide adjunctive services to both physicians and chiropractors. Before providing adjunctive services at the direction of a chiropractor, an MA must obtain a Chiropractic Technician (CT) certification from the Wisconsin Chiropractic Examining Board.

This bill eliminates the requirement that MAs obtain a redundant CT certification in order to provide adjunctive services at the direction of a chiropractor provided they were trained in an education program accredited by the National Commission for Certifying Agencies.

This bill has the support of the Wisconsin Chiropractic Association and the Medical College of Wisconsin. I'm hopeful you will support this commonsense piece of legislation.

TO: Chair Moses, and Members
Assembly Committee on Health, Aging and Long-Term Care
FR: Sue Griffin, President
American Physical Therapy Association – WI Chapter

DA: January 17, 2024

RE: Assembly Bill 830

My name is Dr. Susan Griffin. I am a physical therapist, and the president of the American Physical Therapy Association of Wisconsin (APTA-WI). I am providing written testimony for information only on AB 830. We have discussed our concerns with the Wisconsin Chiropractic Association and are hopeful we can discuss a possible clarifying amendment.

The stated purpose of this bill is to eliminate the requirement that medical assistants (MAs) obtain a chiropractic technician (CT) certification in order to provide adjunctive services at the direction of a chiropractor provided they were trained by an education program accredited by the National Commission for Certifying Agencies. The rationale proposed is that the CT certification is redundant to the educational preparation of an MA.

According to the chiropractic practice act, 'adjunctive services' may include the taking and preparation of a preliminary patient history, including 'taking patient vitals and gathering baseline data regarding a patient, including the nature of the chief complaint, family history, and medical history'. The MA curriculum prepares the individual to do those tasks. However, 'adjunctive services' may also include physiotherapy services, including the 'therapeutic use of physical agents or means, including heat, cold, light, air, water, sound, electricity, massage therapy or bodywork therapy, and physical exercise with and without assistive devices'. The MA curriculum does NOT prepare an individual to perform those activities.

Moraine Park Technical College, with campuses in Beaver Dam, West Bend, and Fond du Lac has both an MA program and a CT program. In Moraine Park's Medical Assistant courses, students learn how to 'record medical histories, obtain vital signs, prepare patients for examination, collect and prepare laboratory specimens, perform CLIA-waived laboratory tests, and instruct patients about medications or special diets' (<https://www.morainepark.edu/academics/programs/medical-assistant/>). The CT program 'explores therapeutic procedures most common to chiropractic practice including essential theory as well as indications and contraindications for their use. Modalities include electrical muscle stimulation; ultrasound; thermotherapy; cryotherapy; light therapy; traction; and therapeutic exercise relating to stretching, strengthening and proprioception enhancement' (https://catalog.morainepark.edu/programs/chiropractic-technician-certificate/index.html?_gl=1*13g9r4k*_ga*ODU1NjMwMTU5LjE3MDU0Mjk4Nzc.*_ga_HHD3T3FDL N*MTcwNTQ1MTkyNS40LjEuMTcwNTQ1MjMzMi4wLjAuMA..#course requirementstext). There is clearly no 'redundancy' between these two courses of study. The MA program prepares the graduate to perform one part of the 'adjunctive services' (taking and preparation of a preliminary patient history), but not the other component of 'adjunctive services' ('physiotherapy services').

There are a couple of ways in which the bill could be modified to address the concerns of APTA-WI. The easiest would be to clarify that a MA does not need to obtain a CT certification to perform tasks related to collecting a 'preliminary patient history', but that they DO need it to provide

'physiotherapy treatment' (both as defined in the chiropractic practice act). Another way would be to clarify that the MA who provides physiotherapy treatment must complete the same 'didactic and clinical training program' as the CT as delineated in Chapter 10.02 of the Chiropractic Administrative Rules (https://docs.legis.wisconsin.gov/code/admin_code/chir/10.pdf). Making these changes would make it clear legislatively that chiropractic care is delegated only to individuals with sufficient education and training.

We look forward to working with the bill authors and the Wisconsin Chiropractic Association to craft language that accomplishes this goal.

Best regards,

Susan Griffin, PT, DPT, MS
President, American Physical Therapy Association of Wisconsin



TO: Members of the Assembly Committee on Health, Aging and Long-Term Care

FROM: Jeff King DC, MS
Associate Professor Department Neurosurgery
Director of Chiropractic
Medical College of Wisconsin

DATE: January 17, 2024

RE: Please Support Assembly Bill 830; Relating to Adjunctive Services by Chiropractors

The Medical College of Wisconsin (MCW) supports Assembly Bill 830 (AB 830), legislation related to adjunctive services by chiropractors. MCW appreciates bill authors Representative Gustafson and Senator Cabral-Guevara for authoring and advancing this important legislation, as well as the opportunity to share MCW's support for the bill with members of the Committee.

As a growing health sciences university, MCW's education mission includes the School of Medicine, School of Pharmacy and Graduate School. MCW is also Wisconsin's top-funded private institution conducting biomedical research in Wisconsin. MCW's physician specialty practice is also comprised of nearly 1,800 physicians and more than 900 advanced practice providers, conducting 5.1 million patient visits annually.

MCW has had chiropractors on faculty in the Department of Neurosurgery since the mid-1990s, as part of MCW's transdisciplinary SpineCare Clinic. What started as one, has now grown to five faculty chiropractors, who will soon be practicing across five clinic locations in our adult and pediatric practices.

MCW has a strong history of providing collaborative care alongside a wide variety of providers, improving patient outcomes and access to care. This relationship has been beneficial for both our faculty chiropractors, as well as our faculty physician colleagues. Beyond patient care, these partnerships have led to cross-disciplinary research papers to advance our knowledge of managing spine related disorders, as well as the creation of a transdisciplinary annual educational conference.

AB 830 will eliminate unneeded red tape and allow us to more efficiently engage with all clinic staff to care for our patients. Currently, when our system hires a medical assistant who is fully trained in initial history taking, vitals, and other important tasks which help us care for our patients, these medical assistants are precluded from working with our chiropractic team until we train them as a chiropractic technicians, or alternatively submit multiple documents to the Wisconsin Department of Safety and Professional Services (DSPS) to obtain a license based on past training.

This administrative burden on MCW's Chiropractic related clinical services, is due to the current limitations in state law, which AB 830 seeks to address.

MCW currently expends funds to send our medical assistants to third-party training sites, which is duplicative with the training our staff have already completed. This redundant training creates confusion and inefficiency in our clinics.

Physicians, nurse practitioners, and physician assistants have no similar delegation-related hurdles to be able to utilize the same individuals, for the same tasks, in the same clinics. As a result, these providers currently provide efficient care to their patients, with less administrative time, effort, and expense. By allowing chiropractors to delegate to medical assistants, as outlined in the bill, this legislation will create the same requirements to delegate to medical assistants across these various provider types.

MCW's SpineCare Clinic staff expend significant time sending transcripts to DSPS, along with sending forms to the schools where our medical assistants have received their training to. To verify their skills, the schools then need to send the required information to DSPS. This added layer of infrastructure consumes resources in our clinics, at the schools, and at DSPS.

Given that most schools training medical assistants are unfamiliar with the DSPS process, there are usually significant time delays securing redundant credentials. Given the fact that the schools and DSPS are unaccustomed to these requests, there have been several occasions at MCW's SpineCare Clinic that the time delay is so great staff, must be sent to training courses which are scheduled many weeks out; taking them out of work for a full day. This leaves clinics short staffed.

Finally, adding medical assistants to the list of providers chiropractors may delegate to, does not change what tasks can be delegated by a chiropractor and does not expand the scope of a chiropractor. The tasks a chiropractor may delegate are already defined in administrative rule by the Wisconsin Chiropractic Examining Board.

MCW appreciates your consideration, and respectfully requests your support for AB 830. If you have any questions or need additional information, please contact Nathan Berken, MCW Vice President of Government Relations, at 414.955.8588, or nberken@mcw.edu.