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## For Department of State Use Only

Sequence Number: 02-16-17

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Effective Date:

# Rulemaking Hearing Rule(s) Filing Form

Rulemaking Hearing Rules are rules filed after and as a result of a rulemaking hearing (Tenn. Code Ann. § 4-5-205)

Pursuant to Tenn. Code Ann. § 4-5-229, any new fee or fee increase promulgated by state agency rule shall take effect on July 1, following the expiration of the ninety (90) day period as provided in § 4-5-207. This section shall not apply to rules that implement new fees or fee increases that are promulgated as emergency rules pursuant to § 4-5-208(a) and to subsequent rules that make permanent such emergency rules, as amended during the rulemaking process. In addition, this section shall not apply to state agencies that did not, during the preceding two (2) fiscal years, collect fees in an amount sufficient to pay the cost of operating the board, commission or entity in accordance with § 4-29-121(b).

Agency/Board/Commission:	Board of Chiropractic Examiners
Division:	
Contact Person:	Mark Cole
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# Revision Type (check all that apply):

Χ	Amendment
$\wedge$	Amenament

New

Repeal

Rule(s) (ALL chapters and rules contained in filing must be listed here. If needed, copy and paste additional tables to accommodate multiple chapters. Please make sure that ALL new rule and repealed rule numbers are listed in the chart below. Please enter only **ONE** Rule Number/Rule Title per row)

Chapter Number	Chapter Title
0260-02	General Rules Governing Chiropractic Examiners
Rule Number	Rule Title
0260-0201	Definitions
0260-0202	Scope of Practice
0260-0212	Continuing Education
0260-0213	Professional Ethics
0260-0221	Chiropractic Preceptor Program
0260-0224	Chiropractic Professional Corporations and Chiropractic Professional Limited Liability Companies

(Place substance of rules and other info here. Please be sure to include a detailed explanation of the changes being made to the listed rule(s). Statutory authority must be given for each rule change. For information on formatting rules go to <a href="http://sos.tn.gov/sites/default/files/forms/Rulemaking\_Guidelines\_August2014.pdf">http://sos.tn.gov/sites/default/files/forms/Rulemaking\_Guidelines\_August2014.pdf</a>)

# Chapter 0260-02 General Rules Governing Chiropractic Examiners

#### Amendments

Chapter 0260-02 Table of Contents is being amended by deleting the language for Rule 0260-02-.24 in its entirety and substituting instead the following language, so that as amended, the new table of content language in 0260-02-.24 shall read:

0260-02-.24 Chiropractic Professional Corporations (CPC) and Chiropractic Professional Limited Liability Companies (CPLLC)

Authority: T.C.A. §§ 63-4-101.

Rule 0260-02-.01 Definitions is amended by adding new paragraph (1) and deleting paragraphs (6), (7), (18), (22), and (24) in their entirety and renumbering the remaining paragraphs accordingly, and the rule is further amended by adding new paragraphs (17), (20), (22), and (24) and renumbering the remaining paragraphs accordingly, so that as amended, the new paragraphs shall read:

- (1) Adjustment A manual or mechanical intervention that may be administered with a high or low velocity, short or long lever, high or low amplitude, directed to specific structures of the frame to improve joint function, neurological integrity, joint mobility or alignment.
- (17) Manipulation A passive therapeutic intervention that may be administered with a high or low velocity, short or long lever, high or low amplitude, directed to specific structures of the frame to improve joint function, neurological integrity, mobility or alignment.
- (20) Physical Therapeutics Physical agents, rehabilitative and/or therapeutic procedures utilized in the restoration and maintenance of health.
- (22) Subluxation An abnormal condition where one or the other of two adjacent articular surfaces has lost its articular or neurological function, position, or alignment and is classified less than a dislocation.
- (24) Therapeutic Care An approved, adjustive, manipulative, nutritional, therapeutic or rehabilitative treatment administered by or ordered by a chiropractic physician for the restoration and maintenance of health.

Authority: T.C.A. §§ 63-4-101, 63-4-102, 63-4-103, 63-4-105, 63-4-106, 63-4-107, 63-4-108, 63-4-109, 63-4-110, 63-4-112, 63-4-114, 63-4-122, and 63-4-123.

Rule 0260-02-.02 Scope of Practice is amended by deleting paragraph (2) and subparagraphs (3)(b), (3)(c), and (3)(d) in their entirety and substituting instead the following language, so that as amended, the new paragraph (2) and new subparagraphs (3)(b), (3)(c) and (3)(d) shall read:

- (2) The scope of practice of a chiropractic physician shall be as set forth in T.C.A. § 63-4-101 and shall include:
  - (a) As a portal of entry provider, a chiropractic physician has authority to make a differential diagnosis that may include the use of patient history, examination techniques, lab analysis and analytical instruments for the purpose of determining vital signs and screening of health status, orthopedic and neurological testing, range of motion and muscles testing and diagnostic evaluation and/or imaging of the human body that may be revealed in a state of pathology, as a basis for making clinical judgments as to the patient's condition, degree or nature of treatment needed and management and rehabilitation of the human body which is in the opinion of the provider, appropriate for the restoration and maintenance of health.

- (b) A chiropractic physician has the authority to perform an adjustment, manipulation or treatment which may include physical therapeutic interventions to the human frame and/or soft tissues for the restoration and/or supportive care and/or maintenance of health.
- (c) The chiropractic physician's responsibility for patient care, case management, and the protection of the patient includes the authority to make a proper referral to a particular health specialist for consultation or collaborative care, and also for treatments, therapeutic procedures, recommendations, recording and reporting to third-party payers, preparing narratives, giving of depositions and in-court testimony as an expert witness and determination of impairment ratings.
- (d) The scope of practice of a chiropractic physician includes such supportive care as nutritional evaluation, recommendation and supplementation, patient management in their mental and physical environment, and due regard for patients concerning diet, hygiene, sanitation and rehabilitation.
- (e) The scope of practice of a chiropractic physician includes the ordering, from a licensed or certified laboratory, analysis of blood, urine, or other bodily fluids, secretions or excretions, for the diagnosis and management of the patient.
- (f) The Board of Chiropractic Examiners does not recognize any one document, guideline, textbook, clinical trial or study as the exclusive endorsement for setting standards of practice.
- (3) (b) Spinal manipulation must be performed by hand or with the use of instruments such as Activator, Grostic, Pettibon, mechanical and/or electromechanical devices.
  - (c) Manipulation moves the spinal segments beyond their normal range of motion for the restoration of neurological integrity, and/or correction of articular dysfunction, but without exceeding the limits of anatomical integrity.
  - (d) A differential diagnosis is necessary to properly establish the indications and contraindications before the administration of the spinal manipulation/adjustment procedure.

Authority: T.C.A. §§ 63-4-101, 63-4-102, 63-4-106, 63-4-107, 63-4-108, 63-4-109, 63-4-114, 63-4-120, 63-4-121, 63-4-122, 63-6-1002.

Rule 0260-02-.02 Scope of Practice is amended by deleting paragraph (4) in its entirety and substituting instead the following language, so that as amended, the new paragraph (4) shall read:

- (4) Acupuncture A licensed chiropractic physician who practices acupuncture must complete two hundred and fifty (250) hours of an acupuncture course accredited by an agency or entity acceptable to the Board and pass the National Board of Chiropractic Examiners (NBCE) Acupuncture Exam. Prior to engaging in the practice of acupuncture, a chiropractic physician must:
  - request that an official transcript be sent directly to the Board's Administrative Office from an accredited acupuncture program demonstrating successful completion of at least 250 hours training and education; and
  - (b) request that official proof be sent directly to the Board's Administrative Office from the NBCE demonstrating successful completion of the acupuncture exam.
  - (c) Upon receipt, the Board office shall provide a letter to proceed with the practice of acupuncture.

Authority: T.C.A. §§ 63-4-101, 63-4-102, 63-4-106, 63-4-107, 63-4-108, 63-4-109, 63-4-114, 63-4-120, 63-4-121, 63-4-122, 63-6-1002.

Rule 0260-02-.12 Continuing Education is amended by deleting subparagraphs (1)(a) and (1)(c) in their entirety and substituting instead the following language and is further amended by deleting paragraph (3) in its entirety and renumbering the remaining paragraphs, so that as amended, the new subparagraphs (1)(a) and (1)(c) shall read:

- (a) Acupuncture Licensees who practice acupuncture shall have six (6) classroom hours each year of the required twenty-four (24) hours in the area of acupuncture. Such licensees must have first met the requirements of Rule 0260-02-.02(4). No credit for continuing education shall be awarded beyond the six (6) hours each year.
- (c) No prior approval is required for continuing education courses conducted or approved by the American Chiropractic Association, the International Chiropractors Association, the Tennessee Chiropractic Association, or CPR training provided by the American Heart Association or the American Red Cross.

Authority: T.C.A. §§ 63-1-108, 63-4-101, 63-4-106 and 63-4-112.

Rule 0260-02-.12 Continuing Education is amended by deleting newly-numbered subparagraph (3)(a), but not its parts, in its entirety and substituting instead the following language, and is further amended by deleting newly-numbered subparagraph (3)(c) and re-lettering the remaining subparagraph accordingly, so that as amended the new subparagraph (3)(a) shall read:

(a) The licensee must, within (thirty) 30 days of a request from the board, provide evidence of continuing education activities. Such evidence must be copies of one (1) or more of the following proofs:

Authority: T.C.A. §§ 63-1-108, 63-4-101, 63-4-106 and 63-4-112.

Rule 0260-02-.12 Continuing Education is amended by deleting newly numbered paragraph (4) and subparagraphs (4)(b) and (7)(d) in their entirety and substituting the following language, so that as amended, the new paragraph (4) and subparagraphs (4)(b) and (7)(d) shall read:

- (4) Distance Learning
  - (b) A maximum of six (6) credit hours may be granted for distance learning courses during each calendar year. If the licensee practices acupuncture, three (3) of these six (6) hours may pertain to such acupuncture practice.
- (7) (d) Any licensee who fails to show compliance with the required continuing education hours in response to the notice contemplated by subparagraph (b) above may be subject to disciplinary action. That disciplinary action will include: (1) Assessment of a civil penalty in the amount of six hundred dollars (\$600.00), which must be paid no later than 30 days after the assessment becomes final; and (2) A requirement that the licensee must make up the hours in which he/she is deficient, in addition to the continuing education hours necessary to be obtained annually. The deficient hours must be made up in the subsequent year. Failure to fulfill these requirements may result in additional disciplinary action.

Authority: T.C.A. §§ 63-1-108, 63-4-101, 63-4-106 and 63-4-112.

Rule 0260-02-.13 Professional Ethics is amended by deleting paragraph (4) and substituting instead the following language, and is further amended by adding new paragraph (9) so that as amended, the new paragraphs (4) and (9) shall read:

- (4) Advertising or promoting, waiving, abrogating, or rebating the deductible and/or co-payment amounts of any insurance policy by forgiving any or all of any patient's obligations for payment, unless the insurer is notified in writing of the fact of such waiver. Advertising or promoting the same must include the notice to the insurer and the record must include proof of the actual notice. If the patient is unable, due to circumstances, to pay for their services and no advertising or promotion is given to the patient, the provider may excuse any portion of fees to insure that the patient may receive the necessary procedure.
- (9) Unlicensed assistants Licensees shall not allow staff personnel to perform procedures or services in the clinic for which the personnel do not hold the license or certification required for such performance. This includes those services for which certification as a chiropractic therapy assistant or a chiropractic x-ray technologist is required. Violators will be subject to a civil penalty of up to one thousand dollars

(\$1000.00) per month for each employee found to be practicing without a license. Failure to pay any assessed civil penalty may result in additional disciplinary action.

Authority: T.C.A. §§ 63-4-101, 63-4-106, 63-4-114, 63-4-119, and 63-4-123.

Rule 0260-02-.21 Chiropractic Preceptor Program is amended by deleting the rule, but not its title, in its entirety and substituting instead the following language, so that as amended, the new rule shall read:

(1) Applications for Preceptor Program

An application will be considered by the board or its designee, based upon:

- (a) If the preceptor named in the application is in good standing with the board.
- (b) If the application for the chiropractic preceptor program includes an intern who is serving his/her internship with a chiropractic college accredited by the Council on Chiropractic Education (CCE), registered with the Commission on Accreditation of the U.S. Department of Education.
- (2) Conditions for Practicing Under an Preceptor Program
  - (a) An intern must have approval from the chiropractor preceptor of the findings/diagnosis and case management plan of all patients assigned for examination and care before commencing treatment. With the approval, an intern will be allowed to perform all diagnostic tests and therapeutic interventions as provided in T.C.A. § 63-4-101.
  - (b) The preceptor program will be discontinued upon graduation of the intern.
  - (c) In the event of a vacation or a prolonged illness the chiropractor preceptor must make arrangements for continued supervision by a licensed chiropractic physician. These arrangements must include obtaining a letter from the new chiropractor preceptor addressed to the previous preceptor stating that he/she will take the responsibility for the supervision as set out in subparagraph (2)(a) above. The previous preceptor must also forward a copy of the letter to the Board Administrative Office.
  - (d) Collection of fees for services and filing claims to third-party-payers must be in the name of the chiropractor preceptor (attending physician).
- (3) Supervision An intern must be supervised by a chiropractic physician licensed in Tennessee. The preceptor shall be on the facility premises while the intern is conducting patient care.

Authority: T.C.A. §§ 63-4-106, 63-4-107, 63-4-108, and 63-4-121.

Rule 0260-02-.24 Chiropractic Professional Corporations and Chiropractic Professional Limited Liability Companies is amended by deleting the rule title in its entirety and substituting instead the following language, so that as amended, the new rule title shall read:

0260-02-.24 Chiropractic Professional Corporations (CPC) and Chiropractic Professional Limited Liability Companies (CPLLC).

Authority: T.C.A. §§ 48-101-605, 48-101-608, 48-101-610, 48-101-618, 48-101-624, 48-101-628, 48-101-629, 48-101-630, 48-248-104, 48-248-202, 48-248-401, 48-248-404, 48-248-409, 48-248-501, 48-248-601, 48-248-602, 48-248-603, 63-4-101, 63-4-103, 63-4-106, 63-4-107, 63-4-114, and 63-4-119.

Rule 0260-02-.24 Chiropractic Professional Corporations (CPC) and Chiropractic Professional Limited Liability Companies (CPLLC) is amended by deleting subparagraphs (1)(b) and (2)(b) in their entirety, including their parts and subparts, and substituting instead the following language, so that as amended, the new subparagraphs (1)(b) and (2)(b) shall read:

- (1) Ownership of Stock With the exception of the health care professional combinations specifically enumerated in T.C.A. § 48-101-610, only the following may form and own shares of stock in a foreign or domestic CPC doing business in Tennessee:
  - 1. Chiropractic physicians licensed pursuant to Tennessee Code Annotated Title 63, Chapter 4; and/or
  - 2. A foreign or domestic general partnership, CPC or CPLLC in which all partners, shareholders, members or holders of financial rights are either:
    - (i) Chiropractic physicians licensed pursuant to Tennessee Code Annotated Title 63, Chapter 4 to practice chiropractic services in Tennessee, or composed of entities which are directly or indirectly owned by such licensed chiropractic physicians; and/or
    - (ii) Professionals authorized by T.C.A. §§ 48-101-610 or 48-248-401 or 48-249-1109 to either own shares of stock in a CPC or be a member or holder of financial rights in a CPLLC; and/or
    - (iii) A combination of professionals authorized by subparts (i) and (ii) as long as those professionals are licensed to practice their professions in Tennessee.
- (2) (b) Membership With the exception of the health care professional combinations specifically enumerated in T.C.A. §§ 48-248-401 and 48-249-1109, only the following may be members or holders of financial rights of a foreign or domestic CPLLC doing business in Tennessee:
  - 1. Chiropractic physicians licensed pursuant to Tennessee Code Annotated Title 63, Chapter 4; and/or
  - 2. A foreign or domestic general partnership, CPC or CPLLC in which all partners, shareholders, members or holders of financial rights are either:
    - (i) Chiropractic physicians licensed pursuant to Tennessee Code Annotated Title 63, Chapter 4 to practice chiropractic services in Tennessee, or composed of entities which are directly or indirectly owned by such licensed chiropractic physicians; and/or
    - (ii) Professionals authorized by T.C.A. §§ 48-101-610 or 48-248-401 or 48-249-1109 to either own shares of stock in a CPC or be a member or holder of financial rights in a CPLLC; and/or
    - (iii) A combination of professionals authorized by subparts (i) and (ii) as long as those professionals are licensed to practice their professions in Tennessee.

 $Authority: T.C.A. \S\S \ 48-101-605, \ 48-101-608, \ 48-101-610, \ 48-101-618, \ 48-101-624, \ 48-101-628, \ 48-101-629, \ 48-101-630, \ 48-248-104, \ 48-248-202, \ 48-248-401, \ 48-248-404, \ 48-248-409, \ 48-248-501, \ 48-248-601, \ 48-248-602, \ 48-248-603, \ 63-4-101, \ 63-4-103, \ 63-4-106, \ 63-4-114, \ and \ 63-4-119.$ 

\* If a roll-call vote was necessary, the vote by the Agency on these rulemaking hearing rules was as follows:

Board Member	Aye	No	Abstain	Absent	Signature (if required)
Richard Cole, D.C.	X				
Andrea L. Selby, D.C.				X	
Joseph Frank Amato, D.C	X				
Cole James Hosenfeld	X				
Chris Alexander, D.C	X				
Sheila Fitzgerald	Х				
Nancy Strawn				X	

I certify that this is an accurate and complete copy of rulemaking hearing rules, lawfully promulgated and adopted by the Board of Chiropractic Examiners (board/commission/ other authority) on 12/18/2015 (mm/dd/yyyy), and is in compliance with the provisions of T.C.A. § 4-5-222.

Notice of Rulemaking Hearing filed with the Department of State on: 10/27/15 (mm/dd/yy) Rulemaking Hearing(s) Conducted on: (add more dates). 12/18/15 (mm/dd/yy) Name of Officer: Mark Cole Assistant General Counsel Title of Officer: Department of Health Subscribed and sworn to before me on:

All rulemaking hearing rules provided for herein have been examined by the Attorney General and Reporter of the State of Tennessee and are approved as to legality pursuant to the provisions of the Administrative Procedures Act, Tennessee Code Annotated, Title 4, Chapter 5.

My commission expires on:

Attorney General and Reporter

I further certify the following:

Filed with the Department of State on:

Effective on:

5 | 19 | 17

Tre Hargett Secretary of State

SECRETARY OF STATE PUBLICATIONS

## **Public Hearing Comments**

One copy of a document containing responses to comments made at the public hearing must accompany the filing pursuant to T.C.A. § 4-5-222. Agencies shall include only their responses to public hearing comments, which can be summarized. No letters of inquiry from parties questioning the rule will be accepted. When no comments are received at the public hearing, the agency need only draft a memorandum stating such and include it with the Rulemaking Hearing Rule filing. Minutes of the meeting will not be accepted. Transcripts are not acceptable.

Board of Chiropractic Examiners Rulemaking Hearing December 18, 2015

#### **Public Comments**

There were two written comments submitted regarding the proposed rules. The first written comment was from Timothy Scott Newton, President of the Tennessee Physical Therapy Association (TPTA). The second commenter was John Williams, an attorney for the Tennessee Chiropractic Association (TCA), who submitted a letter to the Board and orally addressed the Board at the rulemaking hearing. Mr. William's oral comments were an accurate representation of his written comments.

Mr. Newton's letter stated TPTA's concerns that the term "physical therapeutics" as used in Rule 0260-02-.01(20) infringes on the practice of physical therapy under T.C.A. § 63-13-310(b)-(c) and Tennessee Attorney General Opinion 12-27. He stated that TPTA's concern is with the term being used, not its definition. Mr. Newton requested the Board to strike the term "physical therapeutics" from paragraph (20) and replace it with something similar, like "physical agent modalities."

Mr. Williams responded to the comments from the Tennessee Physical Therapy Association (TPTA) regarding the use of the term "physical therapeutics" in these rules. He explained that part of the licensure process requires licensees to pass an exam containing a physiotherapy component. He also stated that:

The TCA's position [is] that "physical therapeutics" is a part of the practice of every chiropractic physician and should be defined and used in the rules . . . if the General Assembly had wished to prohibit the use of the term . . . [it] would have included the words . . . in T.C.A. § 63-13-310(b). It did not do so.

The Board rejected this change. Board member, Cole James Hosenfeld, responded to Mr. Newton's letter and stated that physical therapy modalities is just a part of a litany of services that chiropractors provide and that while "physical therapy" is a protected term that is representative of a discipline, "physical therapeutics" is a service that transcends discipline. Additionally, Richard Cole, D.C., added that the Board's intention is not to have chiropractors hold themselves out to be physical therapists, but to the contrary, the Board intends to punish those practitioners who do so. He stated that the Board artfully and carefully chose to bring clarity to what its practitioners do without infringing on the practice of physical therapists.

Mr. Williams also addressed the Board with several requested corrections. He first requested that the Board amend language to the definition of "subluxation" so as to make the definition grammatically conform to the wording of other listed definitions.

The Board voted to accept the change to the definition of "subluxation."

Secondly, Mr. Williams asked the Board to amend the proposed language in Rule 0260-02-.02(2) by inserting the word "a" between the words "of" and "chiropractic" and the words "and shall include:" at the end of the sentence to make clear that the language includes tasks that are part of a chiropractic physician's scope of practice.

The Board also voted to accept this change.

Next, Mr. Williams requested the Board to amend Rule 0260-02-.02(4) by deleting the period at the end of subparagraph (a) and replacing it with a semicolon with the word "and." Mr. Williams also asked the Board to move the last sentence in subparagraph (b) to new subparagraph (c).

The Board accepted each change.

The next request was to amend Rule 0260-02-.12(7)(f) by adding waiver language to the end of the subparagraph.

The Board did not accept this change as it determined that existing waiver language contained in Rule 0260-02-.12(8) was sufficient to satisfy this request.

Mr. Williams also requested that the Board amend Rule 0260-02-.21(3) by deleting the first sentence and replacing it with the language "an extern must be supervised by a chiropractic physician licensed in Tennessee." He further requested that the Board delete the following two sentences and retain the last sentence of the paragraph.

The Board accepted these changes but changed the word "extern" to "intern." Additionally, the Board voted to change the word "extern" to "intern" in all parts of the rule.

Lastly, Mr. Williams requested that the Board amend the proposed language in Rule 0260-02-.24(1)(b)2(iii) by adding the words "to practice their professions in Tennessee" to the end of the subpart to conform with the proposed language as listed in Rule 0260-02-.24(2)(b)2(iii).

The Board voted to accept this change.

## Regulatory Flexibility Addendum

Pursuant to T.C.A. §§ 4-5-401 through 4-5-404, prior to initiating the rule making process, all agencies shall conduct a review of whether a proposed rule or rule affects small business.

(1) The extent to which the rule or rule may overlap, duplicate, or conflict with other federal, state, and local governmental rules.

These proposed rule amendments do not overlap, duplicate, or conflict with other federal, state, and local governmental rules.

(2) Clarity, conciseness, and lack of ambiguity in the rule or rules.

These proposed rule amendments exhibit clarity, conciseness, and lack of ambiguity.

(3) The establishment of flexible compliance and/or reporting requirements for small businesses.

These proposed rule amendments do not affect flexible compliance and/or reporting requirements for small businesses.

(4) The establishment of friendly schedules or deadlines for compliance and/or reporting requirements for small businesses.

These proposed rule amendment do not affect friendly schedules or deadlines for compliance and/or reporting requirements.

(5) The consolidation or simplification of compliance or reporting requirements for small businesses.

These proposed rule amendments do not consolidate or simplify compliance or reporting requirements for small businesses.

(6) The establishment of performance standards for small businesses as opposed to design or operational standards required in the proposed rule.

These proposed rule amendments do not establish performance standards for small business as opposed to design or operation standards required for the proposed rules.

(7) The unnecessary creation of entry barriers or other effects that stifle entrepreneurial activity, curb innovation, or increase costs.

These rule amendments do not create entry barriers or other effects that stifle entrepreneurial activity, curb innovation, or increase costs.

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#### STATEMENT OF ECONOMIC IMPACT TO SMALL BUSINESSES

Name of Board, Committee or Council: Board of Chiropractic Examiners

Rulemaking hearing date: 12/18/2015

1. Type or types of small business and an identification and estimate of the number of small businesses subject to the proposed rule that would bear the cost of, and/or directly benefit from the proposed rule:

Those practitioners engaged in the practice of chiropractic or business offering chiropractic services will be subject to and will bear the cost of, and/or benefit of the proposed rule amendments. The costs will be minimal.

2. Projected reporting, recordkeeping and other administrative costs required for compliance with the proposed rule, including the type of professional skills necessary for preparation of the report or record:

The proposed rule amendments will require additional paperwork to be reviewed by the Board, but the effect of such regarding reporting, recordkeeping and other administrative costs should be minimal.

3. Statement of the probable effect on impacted small businesses and consumers:

Small businesses and consumers will likely benefit from the proposed rule amendments as the chiropractic corporations will have to be owned by individuals that are licensed by this Chiropractic Board.

4. Description of any less burdensome, less intrusive or less costly alternative methods of achieving the purpose and/or objectives of the proposed rule that may exist, and to what extent, such alternative means might be less burdensome to small business:

There are no less burdensome, less intrusive or less costly alternative methods of achieving the purpose and/or objectives of these proposed rule amendments.

5. Comparison of the proposed rule with any federal or state counterparts:

Federal:

None.

State:

None.

6. Analysis of the effect of the possible exemption of small businesses from all or any part of the requirements contained in the proposed rule.

The proposed rule amendments do not provide for exemption for small businesses.

## Impact on Local Governments

Pursuant to T.C.A. §§ 4-5-220 and 4-5-228 "any rule proposed to be promulgated shall state in a simple declarative sentence, without additional comments on the merits of the policy of the rules or regulation, whether the rule or regulation may have a projected impact on local governments." (See Public Chapter Number 1070 (http://state.tn.us/sos/acts/106/pub/pc1070.pdf) of the 2010 Session of the General Assembly)

The proposed rule amendments should not have a financial impact on local governments.

## Additional Information Required by Joint Government Operations Committee

All agencies, upon filing a rule, must also submit the following pursuant to T.C.A. § 4-5-226(i)(1).

(A) A brief summary of the rule and a description of all relevant changes in previous regulations effectuated by such rule;

These amendments include defining the scope of practice for chiropractic physicians, and incorporate the policy changes made since the last rule amendments were passed. Additionally, the amendments set forth a discipline for failing to complete CE's and of chiropractors using unlicensed chiropractic therapy assistants and x-ray technicians.

**(B)** A citation to and brief description of any federal law or regulation or any state law or regulation mandating promulgation of such rule or establishing guidelines relevant thereto;

None.

**(C)** Identification of persons, organizations, corporations or governmental entities most directly affected by this rule, and whether those persons, organizations, corporations or governmental entities urge adoption or rejection of this rule;

Those practitioners engaged in the practice of chiropractic or businesses offering chiropractic services will be affected by these rule amendments.

(D) Identification of any opinions of the attorney general and reporter or any judicial ruling that directly relates to the rule;

None.

(E) An estimate of the probable increase or decrease in state and local government revenues and expenditures, if any, resulting from the promulgation of this rule, and assumptions and reasoning upon which the estimate is based. An agency shall not state that the fiscal impact is minimal if the fiscal impact is more than two percent (2%) of the agency's annual budget or five hundred thousand dollars (\$500,000), whichever is less;

These rules should not result in any increase or decrease in state or local government revenues or expenditures.

**(F)** Identification of the appropriate agency representative or representatives, possessing substantial knowledge and understanding of the rule;

Mark Cole, Assistant General Counsel, Department of Health.

(G) Identification of the appropriate agency representative or representatives who will explain the rule at a scheduled meeting of the committees;

Mark Cole, Assistant General Counsel, Department of Health.

(H) Office address, telephone number, and email address of the agency representative or representatives who will explain the rule at a scheduled meeting of the committees; and

Office of General Counsel, Department of Health, 665 Mainstream Drive, Nashville, Tennessee 37243, (615) 741-1611, Mark.Cole@tn.gov.

(I) Any additional information relevant to the rule proposed for continuation that the committee requests.

None.

# RULES

#### OF

# TENNESSEE BOARD OF CHIROPRACTIC EXAMINERS DIVISION OF HEALTH RELATED BOARDS

# CHAPTER 0260-02 GENERAL RULES GOVERNING CHIROPRACTIC EXAMINERS

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	0260-0204	Qualifications for Licensure	0260-0219	Board Members, Officers, Consultants,
	0260-02- 05	Procedures for Licensure		Records, Declaratory Orders, and Advisory
	0260-0206	Fees		Rulings
	0260-0207	Application Review, Approval, Denial,	0260-0220	Advertising
		Interviews	0260-0221	Chiropractic Preceptor Program
	0260-0208	Examinations	0260-0222	Substantiation of Services
	0260-0209	Renewal of License	0260-0223	Consumer Right-To-Know Requirements
	0260-0210	Professional Peer Assistance	0260-0224	Chiropractic Professional Corporations (CPC) and
	0260-0211	Retirement and Reactivation of License		Chiropractic Professional Limited Liability
	0260-0212	Continuing Education		Companies (CPLLC)
	0260-0213	Professional Ethics	0260-02-,25	Free Health Clinic and Volunteer Practice
	0260-0214	Repealed		Requirements
	0260-0215	Disciplinary Actions, Civil Penalties, Screening	0260-0226	Chiropractic Record

**0260-02-.01 DEFINITIONS.** As used in these rules, the following terms and acronyms shall have the following meaning ascribed to them:

- (1) Adjustment A manual or mechanical intervention that may be administered with a high or low velocity, short or long lever, high or low amplitude, directed to specific structures of the frame to improve joint function, neurological integrity, joint mobility or alignment.
- (2)(4) Advertising Includes, but is not limited to business solicitation, with or without limiting qualifications, in a card, sign, or device issued to a person; in a sign or marking in or on any building; or in any newspaper, magazine, directory, or other printed matter. Advertising also includes business solicitations communicated by individual, radio, video, or television broadcasting or any other means designed to secure public attention.
- (3)(2) Applicant Any individual seeking licensure by the board who has submitted an official application and paid the application fee.
- (4)(3) Board The Tennessee Board of Chiropractic Examiners.
- (5)(4) Board Administrative Office The office of the Unit Director assigned to the board located at 665 Mainstream Drive, Nashville, TN 37243.
- (6)(5) Board Designee Any person who has received a written delegation of authority from the board to perform board functions subject to review and ratification by the full board where provided by these rules.
- (6) Chiropractic Adjustment A manual or mechanical intervention that may be administered with a high or low velocity, short or long lever, high or low amplitude, with or without recoil and directed by specific anatomical listings designed to reduce or correct a subluxated unit.

- (7) Chiropractic Physical Therapeutics A category of a physical agent utilized as ancillary therapy to adjustive procedures which may give additional physiological support to the five (5) components of a subluxation complex preceding or following specific adjustive procedures.
- (7)(8) Closed Files An administrative action which renders an incomplete or denied file inactive.
- (8)(9) Department Tennessee Department of Health.
- (9)(40) Division The Division of Health Related Boards, Tennessee Department of Health, from which the board receives administrative support.
- (10)(11) Documentation Refers to and includes, but is not limited to, notations made by the provider or his designated assistant in the patient record, relevant reports from other providers, electronically obtained and/or stored information and all diagnostic imaging, etc.
- (11)(12) Excessive That which fails to be substantiated beyond the quantity of procedures customarily performed or utilized by a prudent person similarly trained, skilled and experienced in a specific diagnostic or treatment procedure or technique in question.
- (12)(13) Fee Money, gifts, services, or anything of value offered or received as compensation in return for rendering services; also, the required application fees.
- (13)(14) Good Moral Character The quality of being highly regarded in personal behavior and professional ethics.
- (14)(15) He/she Him/her When "he" appears in the text of these rules, the word represents both the feminine and masculine genders.
- (15)(16) HRB When the acronym HRB appears in the text of these rules, the HRB represents Health Related Boards.
- (16)(17) License Document issued to an applicant who successfully completes the licensure process. The license takes the form of an "artistically designed" license as well as other versions bearing an expiration date.
- (18) Manipulation A passive movement for the purpose of testing joint space mobility and/or a manual intervention utilized for releasing muscles and less contractible structures that have lost elasticity with their effects on joint function, and which is not designed to bring about articular change when locked out of its physiologic joint space and/or range of motion.
- (17) Manipulation A passive therapeutic intervention that may be administered with a high or low velocity, short or long lever, high or low amplitude, directed to specific structures of the frame to improve joint function, neurological integrity, mobility or alignment.
- (18)(19) National Board Means the National Board of Chiropractic Examiners.
- (19)(20) Person Any individual, firm, corporation, partnership, organization, or body politic.
- (20) Physical Therapeutics Physical agents, rehabilitative and/or therapeutic procedures utilized in the restoration and maintenance of health.
- (21) Registrant Any person who has been lawfully issued a license.
- (22) Subluxation When one or the other of two adjacent articular surfaces has lost its normal position, affecting its active, passive or anatomical end range and is classified less than a

- dislocation. A subluxation complex includes one or more of its five components which may result in a primary, related and/or attending diagnosis.
- (22) Subluxation An abnormal condition where one or the other of two adjacent articular surfaces has lost its articular or neurological function, position, or alignment and is classified less than a dislocation.
- (23) Substantiation Any test, examination, recorded symptom or other observation of the patient (or, in the case of a minor or otherwise legally incompetent person, reported to the provider or his staff by the parent or legal guardian) by the provider and determined by said provider to be useful in arriving at a treating or management diagnosis and/ or the determination of what, how, when, where and why to examine, treat, consult or refer a patient.
- (24) Therapeutic Care Any approved care of specific chiropractic adjustive procedures utilized in patient care, for the purpose of returning the patient to a stabilized or pre-clinical status.
- (24) Therapeutic Care An approved, adjustive, manipulative, nutritional, therapeutic or rehabilitative treatment administered by or ordered by a chiropractic physician for the restoration and maintenance of health.
- (25) Use of Title or Description To hold oneself out to the public as having a particular status by means of stating on signs, mailboxes, address plates, stationary, announcements, business cards, or other means of professional identification.
- (26) Written Evidence Includes, but is not limited to, written verification from supervisors or other professional colleagues familiar with the applicant's work.

**Authority:** T.C.A. §§ 4-5-202, 4-5-204, 63-4-101, 63-4-102, 63-4-103, 63-4-105, 63-4-106, 63-4-107, 63-4-108, 63-4-109, 63-4-110, 63-4-112, 63-4-114, 63-4-122, and 63-4-123. **Administrative History:** Original rule filed April 19, 1983; effective May 19, 1983. Amendment filed October 22, 1987; effective December 6, 1987. Amendment filed April 25, 1989; effective July 29, 1989. Repeal and new rule filed December 28, 1995; effective March 12, 1996. Amendment filed February 12, 1996; effective April 27, 1996. Amendment filed August 26, 2002; effective November 9, 2002. Amendment filed September 13, 2002; effective November 27, 2002; effective December 11, 2002.

#### 0260-02-.02 SCOPE OF PRACTICE.

- (1) Any person who possesses a valid unsuspended and unrevoked license issued by the Board has the right to use the title licensed chiropractic physician. No other person shall assume this title on any work, letter, sign, figure, advertisement, or device to indicate that the person using the same is a licensed chiropractic physician. The work performed includes offering case management procedures and recommendations for health care and services to the public.
- (2) The scope of practice of chiropractic physicians shall be as set forth in T.C.A. §§ 63-4-101.
- (2) The scope of practice of a chiropractic physician shall be as set forth in T.C.A. § 63-4-101 and shall include:
  - (a) As a portal of entry provider, a chiropractic physician has authority to make a differential diagnosis that may include the use of patient history, examination techniques, lab analysis and analytical instruments for the purpose of determining vital signs and screening of health status, orthopedic and neurological testing, range of motion and muscles testing and diagnostic evaluation and/or imaging of the human body that may be revealed in a state of pathology, as a basis for making clinical judgments as to the patient's condition, degree or nature of treatment needed and management and rehabilitation of the human body which is in the opinion of the provider, appropriate for the restoration and maintenance of health.

- (b) A chiropractic physician has the authority to perform an adjustment, manipulation or treatment which may include physical therapeutic interventions to the human frame and/or soft tissues for the restoration and/or supportive care and/or maintenance of health.
- (c) The chiropractic physician's responsibility for patient care, case management, and the protection of the patient includes the authority to make a proper referral to a particular health specialist for consultation or collaborative care, and also for treatments, therapeutic procedures, recommendations, recording and reporting to third-party payers, preparing narratives, giving of depositions and in-court testimony as an expert witness and determination of impairment ratings.
- (d) The scope of practice of a chiropractic physician includes such supportive care as nutritional evaluation, recommendation and supplementation, patient management in their mental and physical environment, and due regard for patients concerning diet, hygiene, sanitation and rehabilitation.
- (e) The scope of practice of a chiropractic physician includes the ordering, from a licensed or certified laboratory, analysis of blood, urine, or other bodily fluids, secretions or excretions, for the diagnosis and management of the patient.
- (f) The Board of Chiropractic Examiners does not recognize any one document, guideline, textbook, clinical trial or study as the exclusive endorsement for setting standards of practice.
- (3) Spinal manipulation / Spinal adjustment
  - (a) Training must be performed in chiropractic institutions or institutions that specialize in spinal manipulative therapy. Spinal manipulation is a highly skilled maneuver that requires adequate training. Four hundred (400) hours of classroom instruction and eight hundred (800) hours of supervised clinical training are considered a minimum level of education to properly administer the techniques.
  - (b) Spinal manipulation must be performed by hand or with the use of instruments such as Activator, Grostic, Pettibon, or Sweat instrumentation.
  - (b) Spinal manipulation must be performed by hand or with the use of instruments such as Activator, Grostic, Pettibon, mechanical and/or electromechanical devices.
  - (c) Manipulation moves the spinal segments beyond their normal range of motion for the correction of nerve interference and articular dysfunction, but without exceeding the limits of anatomical integrity.
  - (c) Manipulation moves the spinal segments beyond their normal range of motion for the restoration of neurological integrity, and/or correction of articular dysfunction, but without exceeding the limits of anatomical integrity.
  - (d) A chiropractic diagnosis is necessary to properly establish the indications and contraindications before the administration of the spinal manipulation procedure.
  - (d) A differential diagnosis is necessary to properly establish the indications and contraindications before the administration of the spinal manipulation/adjustment procedure.
- (4) Acupuncture Any licensed chiropractic physician who practices acupuncture shall, prior to commencing such practice, complete two hundred and fifty (250) hours of an acupuncture

- course accredited by an agency or entity acceptable to the Board and pass the National Board of Chiropractic Examiners Acupuncture Exam.
- (4) Acupuncture A licensed chiropractic physician who practices acupuncture must complete two hundred and fifty (250) hours of an acupuncture course accredited by an agency or entity acceptable to the Board and pass the National Board of Chiropractic Examiners (NBCE) Acupuncture Exam. Prior to engaging in the practice of acupuncture, a chiropractic physician must:
  - (a) request that an official transcript be sent directly to the Board's Administrative Office from an accredited acupuncture program demonstrating successful completion of at least 250 hours training and education; and
  - (b) request that official proof be sent directly to the Board's Administrative Office from the NBCE demonstrating successful completion of the acupuncture exam.
  - (c) Upon receipt, the Board office shall provide a letter to proceed with the practice of acupuncture.

**Authority:** T.C.A. §§ 4-5-202, 4-5-204, 63-4-101, 63-4-102, 63-4-106, 63-4-107, 63-4-108, 63-4-109, 63-4-114, 63-4-120, 63-4-121, 63-4-122, 63-6-1002. **Administrative History:** Original rule filed December 5, 1978; effective April 2, 1979. Repeal and new rule filed April 19, 1983; effective May 19, 1983. Amendment filed October 22, 1987; effective December 6, 1987. Repeal and new rule filed December 28, 1995; effective March 12, 1996. Amendment filed October 24, 2002; effective January 7, 2003. Amendment filed June 3, 2004; effective August 17, 2004. Amendment filed April 10, 2007; effective June 24, 2007.

## 0260-02-.03 NECESSITY OF CERTIFICATION.

- (1) Prior to the engagement of the practice of chiropractic in Tennessee, a person must hold a current Tennessee license or temporary license issued pursuant to rule 0260-02-.14.
- (2) It is unlawful for any person who is not licensed in the manner prescribed in T.C.A. §§ 3-4-101 et seq. to represent himself/herself as a licensed chiropractor or to hold himself/herself out to the public as being licensed by means of using a title on signs, mailboxes, address plates, stationary, announcements, telephone listings, calling cards, or other instruments of professional identification.
- (3) Use of Titles Any person who possesses a valid, current and active license issued by the Board that has not been suspended or revoked has the right to use the titles "chiropractor," "chiropractic physician" and "doctor of chiropractic," to use the acronym "D.C.," and to practice chiropractic, as defined in T.C.A. §§ 63-4-101. Any person licensed by the Board to whom this rule applies must use one of the titles authorized by this rule in every "advertisement" [as that term is defined in rule 0260-02-.20 (2) (a)] he or she publishes or the failure to do so will constitute an omission of a material fact which makes the advertisement misleading and deceptive and subjects the licensee to disciplinary action pursuant to T.C.A. §§ 63-4-114 (4), (13), and (16).
- (4) Chiropractic is one of the healing arts and as such the practice of which is restricted to those persons credentialed by the board. Persons engaging in the practice of chiropractic without being credentialed are in violation of T.C.A. §§ 63-1-123.
- (5) Licensed chiropractic physicians by virtue of their license shall be qualified to operate x-ray equipment and order examinations of Imagery for diagnostic purposes pursuant to T.C.A. §§ 63-4-119.

**Authority:** T.C.A. §§ 4-5-202, 4-5-204, 63-4-106, and 63-4-112. **Administrative History:** Original rule filed December 28, 1995; effective March 12, 1996.

### 0260-02-.12 CONTINUING EDUCATION.

- (1) Basic requirements The Board of Chiropractic Examiners requires each licensee to complete twenty-four (24) clock hours of Board-approved continuing education each calendar year (January 1 — December 31).
  - (a) Acupuncture Licensees who practice acupuncture shall have six (6) classroom hours each year of the required twenty four (24) hours in the area of acupuncture. Such licensees must have first met the requirements of Rule 0260-02-02(4). No credit for continuing education shall be awarded beyond the six (6) hours each year. Licensees who do not practice acupuncture shall not be granted credit for acupuncture continuing education.
  - (a) Acupuncture Licensees who practice acupuncture shall have six (6) classroom hours each year of the required twenty-four (24) hours in the area of acupuncture. Such licensees must have first met the requirements of Rule 0260-02-.02(4). No credit for continuing education shall be awarded beyond the six (6) hours each year.
  - (b) Cardiopulmonary Resuscitation (CPR) Two (2) hours of the twenty-four (24) hour requirement may be in CPR training.
  - (c) No prior approval is required for continuing education courses conducted by the American Chiropractic Association, the International Chiropractors Association, the Tennessee Chiropractic Association, or CPR training provided by the American Heart Association or the American Red Cross.
  - (c) No prior approval is required for continuing education courses conducted or approved by the American Chiropractic Association, the International Chiropractors Association, the Tennessee Chiropractic Association, or CPR training provided by the American Heart Association or the American Red Cross.
  - (d) Prior approval is required for all course providers not mentioned in subparagraph (c) of this rule, and may be obtained by submitting the following information to the board's administrative office at least thirty (30) days prior to the scheduled date of the course:
    - 1. A course description or outline; and
    - 2. Names of all lecturers; and
    - 3. Brief résumé of all lecturers; and
    - 4. Number of hours of educational credit requested; and
    - 5. Date of course; and
    - 6. Copies of materials to be utilized in the course; and
    - 7. How verification of attendance is to be documented.
  - (e) Whenever the Board decides that there is information that is crucial for licensees to have, it may prepare and send that information to all continuing education providers in a format no larger than two (2) pages. All approved continuing education providers must,

as a prerequisite to remaining an approved provider, reproduce and distribute this information from the Board to every licensee attending each of its individual continuing education courses or group of courses.

# (2) New licensee requirements

- (a) A six (6) hour Board approved course in risk management, sexual/professional boundaries, and Tennessee statutory and regulatory chiropractic jurisprudence must be taken within twelve (12) months prior to licensure or within the first six (6) months of licensure. If taken prior to licensure, the course must be an additional course beyond the regular chiropractic school program. If taken within the first six (6) months after licensure, the course shall not constitute part of the twenty-four (24) clock hour continuing education requirement in paragraph (1) of this rule for the first calendar year that continuing education is required.
- (b) New licensee by examination or reciprocity New licensees, whether by examination or reciprocity, shall be exempted from the continuing education requirements of 0260-02-.12(1) for the calendar year in which they are licensed, but must take the six (6) hour course as described above in 0260-02-.12(2)(a).
- (3) Current licensee requirement. Before January 1, 2008 every licensee who has not already done so must submit satisfactory proof of having successfully completed, as part of the annual continuing education requirement, the six (6) hour course described in subparagraph (2) (a) of this rule. It is the Board's intent that the six (6) hour course described in subparagraph (2) (a) of this rule must be completed once by all licensees.

# (3)(4) Documentation

- (a) Each licensee shall send proof of completion of the annual continuing education requirement to the board's administrative office so that it is received no later than January 15th of the year immediately following the end of each calendar year. Such proof may be transmitted electronically provided the board has capability for electronic receipt of proof. When proof is mailed to the board's administrative office, such proof must be one (1) or more of the following:
- (a) The licensee must, within (thirty) 30 days of a request from the board, provide evidence of continuing education activities. Such evidence must be copies of one (1) or more of the following proofs:
  - Original certificates or photocopies of original certificates verifying the licensee's attendance at continuing education program(s). The original certificates or photocopies of original certificates must include the following: continuing education program's sponsor, date, clock hours awarded (continuing education units must be converted to clock hours), program title, licensee's name, and license number.
  - 2. Original letters or photocopies of original letters on official stationery from the continuing education program's sponsor indicating date, clock hours awarded (continuing education units must be converted to clock hours), program title, licensee's name, and license number.
  - Original documents or photocopies of original documents verifying successful completion of a written post experience examination to evaluate material retention upon completion of a Multi-Media course, as provided in paragraph (5). The original documents or photocopies of original documents must include the

clock hours awarded (continuing education units must be converted to clock hours), program title, licensee's name, and license number.

- (b) Each licensee must retain original documents or photocopies of original documents which verify proof of attendance and completion of all continuing education requirements. This documentation must be retained for a period of four (4) years from the end of the calendar year in which the continuing education was acquired. This documentation must be produced for inspection and verification, if requested in writing by the board during its verification process. The board will not maintain continuing education files.
- (c) The licensee must, within (thirty) 30 days of a request from the board, provide evidence of continuing education activities. Such evidence must be copies of one (1) or more of the proofs described in subparagraph (a).
- (c)(d) If a person submits documentation for training that is not clearly identifiable as appropriate continuing education, the board will request a written description of the training and how it applies to the practice of chiropractic. If the board determines that the training can not be considered appropriate continuing education, the individual will be given ninety (90) days to replace the hours not allowed. Those hours will be considered replacement hours and cannot be counted during the next renewal period.

## (4)(5) Multi-Media Distance Learning

- (a) Continuing education courses may be presented in the traditional lecture and classroom formats or, with successful completion of a written post experience examination to evaluate material retention, in Multi-Media formats. Multi-Media courses may include courses utilizing:
  - 1. The Internet
  - 2. Closed circuit television
  - 3. Satellite broadcasts
  - 4. Correspondence courses
  - 5. Videotapes
  - CD-ROM
  - 7. DVD
  - 8. Teleconferencing
  - 9. Videoconferencing
  - 10. Distance learning
- (b) A maximum of six (6) credit hours may be granted for multi-media courses during each calendar year. If the licensee practices acupuncture, three (3) of these six (6) hours may pertain to such acupuncture practice.
- (b) A maximum of six (6) credit hours may be granted for distance learning courses during each calendar year. If the licensee practices acupuncture, three (3) of these six (6) hours may pertain to such acupuncture practice.

- (5)(6) Continuing education credit will not be allowed for the following:
  - (a) Regular work activities, administrative staff meetings. case staffing/reporting, etc.
  - (b) Membership in, holding office in, or participation on boards or committees, business meetings of professional organizations, or banquet speeches.
  - (c) Training specifically related to policies and procedures of an agency.
  - (d) Courses that pertain to the promotion and growth, and the business management of a chiropractic practice.
- (6)(7) Continuing Education for Reactivation or Reinstatement of Retired, Revoked, or Expired Licensure.
  - (a) Reactivation of Retired Licensure
    - An individual whose license has been retired for one year or less will be required
      to fulfill continuing education requirements as outlined in this rule as a
      prerequisite to reactivation. Those hours will be considered replacement hours
      and can not be counted toward meeting the calendar year end requirement.
    - 2. Any individual requesting reactivation of a license which has been retired for more than one (1) year must submit, along with the reactivation request, verification which indicates the attendance and completion of twenty-four (24) hours of continuing education for the year in which the license is to be reactivated. The continuing education hours must have been begun and successfully completed before the date of reactivation.
  - (b) Reactivation of Revoked Licensure No person whose license has been revoked for failure to comply with continuing education may be reactivated without complying with these requirements. Continuing education requirements will accumulate at the same rate as that for those licenses which are active. The required clock hours of continuing education must have been begun and successfully completed before the date of reactivation.
  - (c) Reactivation or Reinstatement of Expired Licensure No person whose license has expired may be reactivated or reinstated without submitting evidence of continuing education. The continuing education hours documented at the time of reactivation or reinstatement must equal the hours required, had the license remained in an active status, and must have been begun and successfully completed before the date of reactivation or reinstatement.
  - (d) Continuing education hours obtained as a prerequisite for reactivating or reinstating a license may not be counted toward the calendar year requirement.

#### (7)(8) Violations

- (a) Any licensee who falsely certifies attendance and completion of the required hours of continuing education requirements, or who does not or can not adequately substantiate completed continuing education hours with the required documentation, may be subject to disciplinary action.
- (b) Prior to the institution of any disciplinary proceedings, a letter shall be issued to the last known address of the individual stating the facts or conduct which warrant the intended action.

- (c) The licensee has thirty (30) days from the date of notification to show compliance with all lawful requirements for the retention of the license.
- (d) Any licensee who fails to show compliance with the required continuing education hours in response to the notice contemplated by subparagraph (b) above may be subject to disciplinary action.
- (d) Any licensee who fails to show compliance with the required continuing education hours in response to the notice contemplated by subparagraph (b) above may be subject to disciplinary action. That disciplinary action will include: (1) Assessment of a civil penalty in the amount of six hundred dollars (\$600.00), which must be paid no later than 30 days after the assessment becomes final; and (2) A requirement that the licensee must make up the hours in which he/she is deficient, in addition to the continuing education hours necessary to be obtained annually. The deficient hours must be made up in the subsequent year. Failure to fulfill these requirements may result in additional disciplinary action.
- (e) Continuing education hours obtained as a result of compliance with the terms of a Board Order in any disciplinary action shall not be credited toward the continuing education hours required to be obtained in any renewal period.

# (8)(9) Waiver of Continuing Education

- (a) The Board may grant a waiver of the need to attend and complete the required hours of continuing education if it can be shown to the board that compliance was beyond the physical capabilities of or would constitute undue hardship to the person seeking the waiver.
- (b) Waivers will be considered only on an individual basis and may be requested by submitting the following items to the board's administrative office:
  - 1. A written request for a waiver which specifies what requirements is sought to be waived and written and signed explanation of the reason for the request.
  - 2. Any documentation which supports the reason for the waiver requested or which is subsequently requested by the board.
- (c) A waiver approved by the board is effective only for the calendar year for which the waiver is sought.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-1-108, 63-4-101, 63-4-106 and 63-4-112. Administrative History: Original rule filed December 28, 1995; effective March 12, 1996. Amendment filed December 13, 2000; effective February 26, 2001. Amendment filed August 26, 2002; effective November 9, 2002. Amendment filed September 13, 2002; effective November 27, 2002. Amendment filed September 27, 2002; effective December 11, 2002. Amendment filed December 4, 2003; effective February 17, 2004. Amendments filed January 5, 2006; effective March 21, 2006. Amendment filed October 18, 2006; effective January 1, 2007. Amendment filed January 11, 2007; effective March 27, 2007. Amendment filed April 10, 2007; effective June 24, 2007. Amendments filed October 27, 2008; effective January 10, 2009. Amendment filed July 26, 2010; effective October 24, 2010. Amendment filed October 14, 2011; effective January 12, 2012.

**0260-02-.13 PROFESSIONAL ETHICS.** Immoral, unprofessional, unethical, or dishonorable conduct shall include, but not be limited to, the following:

(1) Conduct designed to, or likely to, deceive, or harm the public.

- (2) Being a party to or aiding and abetting the violation of these regulations or the laws of the State of Tennessee regulating the practice of chiropractic.
- (3) The intentional or negligent use of any false, fraudulent or forged statement, writing or document, or the use of any fraudulent, deceitful, dishonest, or immoral practice in connection with any of the licensing requirements of T.C.A. §§ 63-4-101, et seq.
- (4) Advertising or promoting, waiving, abrogating, or rebating the deductible and/or co-payment amounts of any insurance policy by forgiving any or all of any patient's obligations for payment thereunder, unless the insurer is notified in writing of the fact of such waiver, abrogation, rebate, or forgiveness. Advertising or promoting the same must include the intent of notice to the insurer and the record must include proof to the actual notice to the appropriate third party. If no advertising or promotion is given to any patient in the practice, the provider may excuse any portion or all fees to insure that all patients may receive all necessary procedures, if unable, due to circumstances, pay for their services.
- (4) Advertising or promoting, waiving, abrogating, or rebating the deductible and/or co-payment amounts of any insurance policy by forgiving any or all of any patient's obligations for payment, unless the insurer is notified in writing of the fact of such waiver. Advertising or promoting the same must include the notice to the insurer and the record must include proof of the actual notice. If the patient is unable, due to circumstances, to pay for their services and no advertising or promotion is given to the patient, the provider may excuse any portion of fees to insure that the patient may receive the necessary procedure.
- (5) Grossly excessive use of examinations of a patient or a pattern of clearly excessive use of examinations of patients when patients are charged for this service or reimbursement of the examination(s) is requested from a third party. The conduct mentioned herein is presumed to have occurred when there is no documented, substantiated, finding(s) or condition(s) of the patient(s) which warrant(s) the use of examination(s) for a chiropractic diagnosis.
- (6) Grossly excessive use of care and treatment of a patient or a pattern of clearly excessive use of care and treatment of patients when patients are charged for this service or reimbursement of payment for the care and treatment is requested from a third party. The conduct mentioned herein is presumed to have occurred when there is no documented, substantiated finding(s) or condition(s) of the patient(s) based on a chiropractic diagnosis which warrant(s) the treatment(s) and care performed.
- (7) A chiropractic physician shall not overutilize or otherwise improperly use ionizing radiation. In order to avoid overutilization of ionizing radiation, a chiropractic physician shall observe the following guidelines:
  - (a) Routine radiography of any patient shall not be performed without due regard for clinical need;
  - (b) Subsequent radiographic evaluation of the patient shall not be undertaken without significant observable clinical indication, as determined by the treating chiropractic physician. The significant observable indication required by this subsection shall not apply to reevaluations of the spinal subluxation complex. The spinal subluxation complex is determined to be a significant observable indication.
- (8) Sexual misconduct.
  - (a) Licensees shall not engage in sexual harassment. Sexual harassment is sexual solicitation, physical advances or verbal or nonverbal conduct that is sexual in nature,

that occurs in connection with the licensee's activities or roles as a licensee and that either is unwelcome, offensive, or creates a hostile workplace environment and the licensee knows or is told this, or is sufficiently severe or intense to be abusive to a reasonable person in the context. Sexual harassment can consist of a single intense or severe act or of multiple persistent or pervasive acts.

- (b) Licensees shall not engage in sexual relationships with current patients, employees, or co-workers because such relationships are likely to impair judgment or be exploitative.
- (c) Licensees shall not accept as patients persons with whom they have engaged in sexual intimacies.
- (d) Licensees shall not engage in sexual intimacies with a former patient for at least six (6) months after cessation or termination of professional services.
- (e) Licensees must respect a patient's dignity at all times and should provide appropriate gowns and private facilities for dressing, undressing, and examination. A licensee should not be present in the room when a patient is dressing or undressing.
- (f) Licensees may have a chaperone present during examination for the protection of both the patient and the licensee. A licensee should refuse to examine sensitive parts of the patient's body without a chaperone present.
- (9) Unlicensed assistants Licensees shall not allow staff personnel to perform procedures or services in the clinic for which the personnel do not hold the license or certification required for such performance. This includes those services for which certification as a chiropractic therapy assistant or a chiropractic x-ray technologist is required. Violators will be subject to a civil penalty of up to one thousand dollars (\$1000.00) per month for each employee found to be practicing without a license. Failure to pay any assessed civil penalty may result in additional disciplinary action.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-4-401, 63-4-106, and 63-4-114. Administrative History: Original rule filed December 28, 1995; effective March 12, 1996. Amendment filed February 12, 1996; effective April 27, 1996. Amendment filed April 14, 2003; effective June 2003.

#### 0260-02-.14 REPEALED.

**Authority:** T.C.A. §§ 4-5-202, 4-5-204, 63-4-101, 63-4-103, 63-4-106, 63-4-112, 63-4-114, 63-4-120, and Public Chapter 618 of the Public Acts 2000. **Administrative History:** Original rule filed December 28, 1995; effective March 12, 1996. Amendment filed December 13, 2000; effective February 26, 2001. Repeal filed October 14, 2011; effective January 12, 2012.

shall be confined in its operation to the specific provision or provisions so held unconstitutional or invalid, and the inapplicability or invalidity of any section, clause, sentence or part in any one or more instances shall not be taken to affect or prejudice in any way its applicability or validity in any other instance.

# (6) Telemarketing.

- (a) Telemarketing or telephonic solicitation by licensees, their employees, or agents to victims of accidents or disaster shall be considered unethical if carried out within thirty (30) days of the accident or disaster, and subject the licensee to disciplinary action pursuant to T.C.A. §§ 63-4-114.
- (b) Telemarketing transcripts shall be maintained for a period of two (2) years following their utilization.
- (c) A log of contacts must be maintained for a period of two (2) years following the telemarketing encounter.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-4-106, 63-4-114 and 63-4-122. Administrative History: Original rule filed December 28, 1995; effective March 12, 1996. Amendment filed February 12, 1996; effective April 27, 1996. Amendment filed November 22, 1999; effective February 5, 2000. Amendment filed April 10, 2007; effective June 24, 2007.

## 0260-02-.21 CHIROPRACTIC PRECEPTOR PROGRAM.

(1) Application for Preceptor Program

An application will be considered by the board or its designee, based upon;

- (a) If the preceptor named in the application is in good standing with the board.
- (b) If the application for the chiropractic preceptor program includes an intern/extern whom is serving his/her internship with a chiropractic college accredited by the Council on Chiropractic Education (CCE), registered with the Commission on Accreditation of the U.S. Department of Education.
- (2) Conditions for Practice Under a Preceptor Program
  - (a) The conditions for practice are the same as for a temporary licensee, as outlined in rule 0260-02-.14(2) and (3), additionally;
  - (b) The preceptor program will be discontinued upon graduation of the intern/extern, however, if the graduate has completed the application for licensure in this state and upon filing an application for temporary license, when approved, including the payment of the fee in accordance with rule 0260-02-.14(I), may continue, practicing as a temporary licensee.

#### (1) Applications for Preceptor Program

An application will be considered by the board or its designee, based upon:

- (a) If the preceptor named in the application is in good standing with the board.
- (b) If the application for the chiropractic preceptor program includes an intern who is serving his/her internship with a chiropractic college accredited by the Council on

Chiropractic Education (CCE), registered with the Commission on Accreditation of the U.S. Department of Education.

- (2) Conditions for Practicing Under a Preceptor Program
  - (a) An intern must have approval from the chiropractor preceptor of the findings/diagnosis and case management plan of all patients assigned for examination and care before commencing treatment. With the approval, an intern will be allowed to perform all diagnostic tests and therapeutic interventions as provided in T.C.A. § 63-4-101.
  - (b) The preceptor program will be discontinued upon graduation of the intern.
  - (c) In the event of a vacation or a prolonged illness the chiropractor preceptor must make arrangements for continued supervision by a licensed chiropractic physician. These arrangements must include obtaining a letter from the new chiropractor preceptor addressed to the previous preceptor stating that he/she will take the responsibility for the supervision as set out in subparagraph (2)(a) above. The previous preceptor must also forward a copy of the letter to the Board Administrative Office.
  - (d) Collection of fees for services and filing claims to third-party-payers must be in the name of the chiropractor preceptor (attending physician).
- (3) Supervision An intern must be supervised by a chiropractic physician licensed in Tennessee. The preceptor shall be on the facility premises while the intern is conducting patient care.

**Authority:** T.C.A. §§ 4-5-202, 4-5-204, 63-4-106, 63-4-107, 63-4-108, 63-4-120, and 63-4-121. **Administrative History:** Original rule filed December 28, 1995; effective March 12, 1996.

**0260-02-.22 SUBSTANTIATION OF SERVICES.** It is intended that these procedures are the accepted standard(s) and anything less than this shall be considered unprofessional and unethical conduct in the practice of chiropractic and may subject a licensee to disciplinary action pursuant to T.C.A. §§ 63-4-114 (4).

- (1) These standards apply to all licensed chiropractic physicians. These standards also apply to those examinations advertised at a reduced fee or free (no charge) services.
- (2) Adequate patient records shall be legibly maintained.
- (3) Initial and follow-up services (daily records) shall consist of documentation to justify care.
- (4) If abbreviations or symbols are used in the daily recordkeeping, a key must be provided.
- (5) All patient records shall include but not be limited to:
  - (a) patient history
  - (b) subjective/objective findings
  - (c) examination
  - (d) diagnosis
  - (e) treatment,

- (f) and reevaluation or referral.
- (6) In any disciplinary action against a chiropractic physician for any reason, the Board shall apply these minimal clinical standards.

**Authority:** T.C.A. §§ 4-5-202, 4-5-204, 63-4-101, 63-4-106, and 63-4-114. **Administrative History:** Original rule filed February 12, 1996; effective April 27, 1996.

## 0260-02-.23 CONSUMER RIGHT-TO-KNOW REQUIREMENTS.

- (1) Malpractice Reporting Requirements The threshold amount below which medical malpractice judgments, awards or settlements in which payments are awarded to complaining parties need not be reported pursuant to the "Health Care Consumer Right-To-Know Act of 1998" shall be set by statute, as provided in Public Chapter 373 of the Public Acts of 1999.
- (2) Criminal Conviction Reporting Requirements For purposes of the "Health Care Consumer Right-To-Know Act of 1998, the following criminal convictions must be reported:
  - (a) Conviction of any felony; and
  - (b) Conviction or adjudication of guilt of any misdemeanor within the most recent ten (10) years, regardless of its classification, in which any element of the misdemeanor involves any one or more of the following:
    - Sex.
    - Alcohol or drugs.
    - 3. Physical injury or threat of injury to any person.
    - 4. Abuse or neglect of any minor, spouse or the elderly.
    - 5. Fraud or theft.
  - (c) If any misdemeanor conviction reported under this rule is ordered expunged, a copy of the order of expungement signed by the judge must be submitted to the Department before the conviction will be expunged from any profile.

**Authority:** T.C.A. §§ 4-5-202, 4-5-204, 63-4-106, 63-51-101, et seq., and Public Chapter 373 of the Public Acts of 1999. **Administrative History:** Original rule 0260-02-.23 filed March 14, 2000; effective May 28, 2000.

0260-02-24 CHIROPRACTIC PROFESSIONAL CORPORATIONS AND CHIROPRACTIC PROFESSIONAL LIMITED LIABILITY COMPANIES.

0260-02-.24 Chiropractic Professional Corporations (CPC) and Chiropractic Professional Limited Liability Companies (CPLLC).

- (1) Chiropractic Professional Corporations (CPC) Except as provided in this rule Chiropractic Professional Corporations shall be governed by the provisions of Tennessee Code Annotated, Title 48, Chapter 101, Part 6.
  - (a) Filings A CPC need not file its Charter or its Annual Statement of Qualifications with the Board.

- (b) Ownership of Stock With the exception of the health care professional combinations specifically enumerated in T.C.A. § 48-101-610, only the following may form and own shares of stock in a foreign or domestic CPC doing business in Tennessee:
  - 1. Chiropractic physicians licensed pursuant to Tennessee Code Annotated Title 63, Chapter 4 or licensed in another state; and/or
  - 2. A foreign or domestic general partnership, CPC or CPLLC in which all partners, shareholders, members or holders of financial rights are either:
    - (i) Chiropractic physicians licensed pursuant to Tennessee Code Annotated Title 63, Chapter 4 to practice chiropractic in Tennessee or chiropractic physicians licensed by other states, or composed of entities which are directly or indirectly owned by such licensed chiropractic physicians; and/or
    - (ii) Professionals authorized by T.C.A. §§ 48-101-610 or 48-248-401 or 48-249-1109 to either own shares of stock in a CPC or be a member or holder of financial rights in a CPLLC; and/or
    - (iii) A combination of professionals authorized by subparts (i) and (ii).
- (b) Ownership of Stock With the exception of the health care professional combinations specifically enumerated in T.C.A. § 48-101-610, only the following may form and own shares of stock in a foreign or domestic CPC doing business in Tennessee:
  - Chiropractic physicians licensed pursuant to Tennessee Code Annotated Title 63, Chapter 4: and/or
  - 2. A foreign or domestic general partnership, CPC or CPLLC in which all partners, shareholders, members or holders of financial rights are either:
    - (i) Chiropractic physicians licensed pursuant to Tennessee Code Annotated
      Title 63, Chapter 4 to practice chiropractic services in Tennessee, or
      composed of entities which are directly or indirectly owned by such
      licensed chiropractic physicians; and/or
    - (ii) Professionals authorized by T.C.A. §§ 48-101-610 or 48-248-401 or 48-249-1109 to either own shares of stock in a CPC or be a member or holder of financial rights in a CPLLC; and/or
    - (iii) A combination of professionals authorized by subparts (i) and (ii) as long as those professionals are licensed to practice their professions in Tennessee.
- (c) Officers and Directors of Chiropractic Professional Corporations -
  - All, except the following officers, must be persons who are eligible to form or own shares of stock in a chiropractic professional corporation as limited by T.C.A. §§ 48-101-610 (d) and subparagraph (1) (b) of this rule:
    - (i) Secretary;
    - (ii) Assistant Secretary:

- (iii) Treasurer; and
- (iv) Assistant Treasurer.
- With respect to members of the Board of Directors, only persons who are eligible
  to form or own shares of stock in a chiropractic professional corporation as
  limited by T.C.A. §§ 48-101-610 (d) and subparagraph (1) (b) of this rule shall be
  directors of a CPC.

## (d) Practice Limitations

- Engaging in, or allowing another chiropractic physician incorporator, shareholder, officer, or director, while acting on behalf of the CPC, to engage in, chiropractic practice in any area of practice or specialty beyond that which is specifically set forth in the charter may be a violation of the professional ethics enumerated in Rule 0260-02-.13 and/or Tennessee Code Annotated, Section 63-4-114 (4).
- Nothing in these rules shall be construed as prohibiting any health care professional licensed pursuant to Tennessee Code Annotated, Title 63 from being an employee of or a contractor to a CPC.
- 3. Nothing in these rules shall be construed as prohibiting a CPC from electing to incorporate for the purposes of rendering professional services within two (2) or more professions or for any lawful business authorized by the Tennessee Business Corporations Act so long as those purposes do not interfere with the exercise of independent chiropractic judgment by the chiropractic physician incorporators, directors, officers, shareholders, employees or contractors of the CPC who are practicing chiropractic as defined by Tennessee Code Annotated, Section 63-4-101.
- 4. Nothing in these rules shall be construed as prohibiting a chiropractic physician from owning shares of stock in any type of professional corporation other than a CPC so long as such ownership interests do not interfere with the exercise of independent chiropractic judgment by the chiropractic physician while practicing chiropractic as defined by Tennessee Code Annotated, Section 63-4-101.
- (2) Chiropractic Professional Limited Liability Companies (CPLLC) Except as provided in this rule Chiropractic Professional Limited Liability Companies shall be governed by either the provisions of Tennessee Code Annotated, Title 48, Chapter 248 or Public Chapter 286 of the Public Acts of 2005.
  - (a) Filings Articles filed with the Secretary of State shall be deemed to be filed with the Board and no Annual Statement of Qualifications need be filed with the Board.
  - (b) Membership With the exception of the health care professional combinations specifically enumerated in T.C.A. §§ 48-248-401 and 48-249-1109, only the following may be members or holders of financial rights of a foreign or domestic CPLLC doing business in Tennessee:
    - Chiropractic physicians licensed pursuant to Tennessee Code Annotated Title 63, Chapter 4 or licensed in another state; and/or
    - 2. A foreign or domestic general partnership, CPC or CPLLC in which all partners, shareholders, members or holders of financial rights are either:

- (i) Chiropractic physicians licensed pursuant to Tennessee Code Annotated Title 63, Chapter 4 to practice chiropractic in Tennessee or chiropractic physicians licensed by other states, or composed of entities which are directly or indirectly owned by such licensed chiropractic physicians; and/or
- (ii) Professionals authorized by T.C.A. §§ 48-101-610 or 48-248-401 or 48-249-1109 to either own shares of stock in a CPC or be a member or holder of financial rights in a CPLLC; and/or
- (iii) A combination of professionals authorized by subparts (i) and (ii).
- (b) Membership With the exception of the health care professional combinations specifically enumerated in T.C.A. §§ 48-248-401 and 48-249-1109, only the following may be members or holders of financial rights of a foreign or domestic CPLLC doing business in Tennessee:
  - 1. Chiropractic physicians licensed pursuant to Tennessee Code Annotated Title 63, Chapter 4; and/or
  - 2. A foreign or domestic general partnership, CPC or CPLLC in which all partners, shareholders, members or holders of financial rights are either:
    - (i) Chiropractic physicians licensed pursuant to Tennessee Code Annotated
      Title 63, Chapter 4 to practice chiropractic services in Tennessee, or
      composed of entities which are directly or indirectly owned by such
      licensed chiropractic physicians; and/or
    - (ii) Professionals authorized by T.C.A. §§ 48-101-610 or 48-248-401 or 48-249-1109 to either own shares of stock in a CPC or be a member or holder of financial rights in a CPLLC; and/or
    - (iii) A combination of professionals authorized by subparts (i) and (ii) as long as those professionals are licensed to practice their professions in Tennessee.
- (c) Managers, Directors or Governors of a CPLLC
  - 1. All, except the following managers, must be persons who are eligible to form or become members or holders of financial rights of a chiropractic professional limited liability company as limited by T.C.A. §§ 48- 248-401 and subparagraph (2) (b) of this rule:
    - (i) Secretary
    - (ii) Treasurer
  - Only persons who are eligible to form or become members or holders of financial rights of a chiropractic professional limited liability company as limited by T.C.A. §§ 48-248-401 and subparagraph (2) (b) of this rule shall be allowed to serve as a director, or serve on the Board of Governors of a CPLLC.
- (d) Practice Limitations
  - 1. Engaging in, or allowing another chiropractic physician member, officer, manager, director, or governor, while acting on behalf of the CPLLC, to engage in,

chiropractic practice in any area of practice or specialty beyond that which is specifically set forth in the articles of organization may be a violation of the professional ethics enumerated in Rule 0260-02-.13 and/or Tennessee Code Annotated, Section 63-4-114 (4).

- 2. Nothing in these rules shall be construed as prohibiting any health care professional licensed pursuant to Tennessee Code Annotated, Title 63 from being an employee of or a contractor to a CPLLC.
- 3. Nothing in these rules shall be construed as prohibiting a CPLLC from electing to form for the purposes of rendering professional services within two (2) or more professions or for any lawful business authorized by the Tennessee Limited Liability Company Act or the Tennessee Revised Limited Liability Company Act so long as those purposes do not interfere with the exercise of independent chiropractic judgment by the chiropractic physician members or holders of financial rights, governors, officers, managers, employees or contractors of the CPLLC who are practicing chiropractic as defined by Tennessee Code Annotated, Section 63-4-101.
- 4. Nothing in these rules shall be construed as prohibiting a chiropractic physician from being a member of any type of professional limited liability company other than a CPLLC so long as such membership interests do not interfere with the exercise of independent chiropractic judgment by the chiropractic physician while practicing chiropractic as defined by Tennessee Code Annotated, Section 63-4-101.
- 5. All CPLLCs formed in Tennessee pursuant to Tennessee Code Annotated, Section 48-248-104 or Public Chapter 286 of the Public Acts of 2005, to provide services only in states other than Tennessee shall annually file with the Board a notarized statement that they are not providing services in Tennessee.
- (3) Dissolution The procedure that the Board shall follow to notify the attorney general that a CPC or a CPLLC has violated or is violating any provision of Title 48, Chapters 101 and/or 248 or Public Chapter 286 of the Public Acts of 2005, shall be as follows but shall not terminate or interfere with the secretary of state's authority regarding dissolution pursuant to Tennessee Code Annotated, Sections 48-101-624 or 48-248-409.
  - (a) Service of a written notice of violation by the Board on the registered agent of the CPC and/or CPLLC or the secretary of state if a violation of the provisions of Tennessee Code Annotated, Title 48, Chapters 101 and/or 248 or Public Chapter 286 of the Public Acts of 2005 occurs.
  - (b) The notice of violation shall state with reasonable specificity the nature of the alleged violation(s).
  - (c) The notice of violation shall state that the CPC and/or CPLLC must, within sixty (60) days after service of the notice of violation, correct each alleged violation or show to the Board's satisfaction that the alleged violation(s) did not occur.
  - (d) The notice of violation shall state that, if the Board finds that the CPC and/or CPLLC is in violation, the attorney general will be notified and judicial dissolution proceedings may be instituted pursuant to Tennessee Code Annotated, Title 48.
  - (e) The notice of violation shall state that proceedings pursuant to this section shall not be conducted in accordance with the contested case provisions of the Uniform Administrative Procedures Act, compiled in Title 4,Chapter 5 but that the CPC and/or

CPLLC, through its agent(s), shall appear before the Board at the time, date, and place as set by the Board and show cause why the Board should not notify the attorney general and reporter that the organization is in violation of the Act or these rules. The Board shall enter an order that states with reasonable particularity the facts describing each violation and the statutory or rule reference of each violation. These proceedings shall constitute the conduct of administrative rather than disciplinary business.

- (f) If, after the proceeding the Board finds that a CPC and/or CPLLC did violate any provision of Title 48, Chapters 101 and/or 248 or these rules, and failed to correct said violation or demonstrate to the Board's satisfaction that the violation did not occur, the Board shall certify to the attorney general and reporter that it has met all requirements of either Tennessee Code Annotated, Sections 48-101-624 (1)-(3) and/or 48-248-409 (1)-(3) and/or Public Chapter 286 of the Public Acts of 2005.
- (4) Violation of this rule by any chiropractic physician individually or collectively while acting as a CPC or as a CPLLC may subject the chiropractic physician(s) to disciplinary action pursuant to Tennessee Code Annotated, Section 63-4-114 (4).
- (5) The authority to own shares of stock or be members or holders of financial rights in an CPC or an CPLLC granted by statute or these rules to professionals not licensed in this state shall in no way be construed as authorizing the practice of any profession in this state by such unlicensed professionals.

**Authority:** T.C.A. §§ 4-5-202, 4-5-204, 48-101-605, 48-101-608, 48-101-610, 48-101-618, 48-101-624, 48-101-628, 48-101-629, 48-101-630, 48-248-104, 48-248-202, 48-248-401, 48-248-404, 48-248-409, 48-248-501, 48-248-601, 48-248-602, 48-248-603, 63-4-101, 63-4-103, 63-4-106, 63-4-107, 63-4-114, 63-4-119, and Public Chapter 286 of the Public Acts of 2005. **Administrative History:** Original rule filed December 18, 2003; effective March 2, 2004. Amendment filed March 16, 2007; effective May 30, 2007. Amendment filed August 23, 2012; effective November 21, 2012.

## 0260-02-.25 FREE HEALTH CLINIC AND VOLUNTEER PRACTICE REQUIREMENTS.

- (1) Free Health Clinic Practice Pursuant to T.C.A. §§ 63-1-201.
  - (a) Any chiropractor licensed to practice chiropractic in this state or any other state who has not been disciplined by any licensure board may have his/her license converted to or receive a Tennessee "Special Volunteer License," as defined in T.C.A. §§ 63-1-201, which will entitle the licensee to practice without remuneration solely within a "free health clinic," as defined by T.C.A. §§ 63-1-201, at a specified site or setting by doing the following:
    - 1. Obtaining from the Board's administrative office a "Special Volunteer License" application, completing it and submitting it along with any required documentation to the Board's administrative office; and
    - 2. Have the licensing authority of every state in which the chiropractor holds or ever held a license to practice submit directly to the Board's administrative office the equivalent of a "certificate of fitness" as described in T.C.A. §§ 63-1-118 which shows that the license has never been subjected to any disciplinary action and is free and clear of all encumbrances; and
    - 3. For chiropractors who have not been licensed in Tennessee, comply with all provisions of subparagraphs (2) (d), (2) (e), and (2) (f) of rule 0260-02-.05 and the Health Care Consumer-Right-To-Know Act compiled at T.C.A. §§ 63-51-101, et seq.; and