# MASSAGE NEWS

Newsletter of the Maryland Board of Chiropractic & Massage Therapy Examiners

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### LATE SUMMER 2013 INFORMATIONAL UPDATE EDITION



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SCHEDULE OF THE REMAINING 2013 MEETINGS

### \*BOARD MEETINGS

SEPTEMBER 12 OCTOBER 10 NOVEMBER 14 DECEMBER 12

Applicants, Licensees, and Registrants are Welcome to Attend ANY General Session

Meeting

### MASSAGE THERAPY JP EXAMINATIONS

SEPTEMBER 23 OCTOBER 28 NOVEMBER 18 DECEMBER 16

\*ALL DATES SUBJECT TO CHANGE DUE TO INCLEMENT WEATHER OR DISCIPLINARY HEARINGS

### **BOARD PRESIDENT'S MESSAGE**

### Dr. Michael Fedorczyk, D.C.

Board Members are appointed by the Governor of Maryland from a list supplied to the Office of Executive Appointments by the professional massage and chiropractic associations and the general public. Members serve for an initial 4 year term and are eligible for an additional 4 year renewal appointment upon recommendation to the Governor by the Department of Health & Mental Hygiene (DHMH). All members serve solely as volunteers and are paid only per diem and mileage for the time at meetings and at designated events. This Board has been blessed for many years with a diligent, proactive, and professional cadre of members and supporting staff.

The State Board of Chiropractic & Massage Therapy Examiners (the "Board") operates under the provisions of Title 3 of the Health Occupations Article of the Annotated Code of Maryland. The Board is the licensing authority for Chiropractors, Chiropractic Assistants, Massage Therapists and Massage Practitioners in the State of Maryland. The Board is mandated to protect the public by regulating the practice of chiropractic and massage therapy in Maryland; by licensing, registering and certifying qualified chiropractors, chiropractic assistants, massage therapists and massage practitioners; establishing fees; maintaining a current roster of all licensees; administration of licensing examinations; enforcing current statutes and regulations; adopting new regulations to carry out provisions of the Title; suggesting new changes to the Title to keep abreast of trends and practice issues; adopting standards of practice for chiropractic and massage therapy; verification of credentials; issuance of licenses; establish requirements for and verification of completion of continuing education; investigation of complaints based on alleged violations of regulations and statutes; formal and informal disciplining of licensees; create committees as deemed appropriate to advise the Board. The program is 100% special funded. The fund is supported exclusively by revenues generated by licensing fees. The Board consists of 11 members appointed by the Governor with the advice of the Senate. Six members of the Board are licensed chiropractors, three are licensed massage therapists and two consumer members represent the pub-

### **MAJOR BOARD TRANSITIONS**

MARYLAND BOARD OF CHIROPRACTIC & MASSAGE THERAPY EXAMINERS COMPOSITION FOR 2013 (Effective July 1, 2013)

Michael Fedorczyk, D.C., President
Jonathan Nou, D.C., Vice President
Robert Frieman, D.C., Secretary/Treasurer
Stephanie Chaney, D.C., Past President
Karen Biagiotti, LMT, Member
Gwenda Harrison, LMT, Member
David Cox, LMT, Member
Ernestine Jones Jolivet, Consumer Member
Gloria Boddie-Epps, Consumer Member
Joanne Bushman, D.C., Member
Michael Moskowitz, D.C., Member

I truly appreciate all feedback, comments and pro-active suggestions to make the Board and its services better. As we continue to transition into the electronic mode, responses, renewals, data postings etc.; it is more accurate and much faster as well as cost-saving. Our website has many new features and up-to-date information on Disciplinary cases, Newsletters, and General Board Minutes. We have begun our electronic email alert system that will enable the Board to notify all licensees and registrants of important matters in real time. Thank you for all of your support. If you have any questions or comments, please feel free to contact the Board via the Deputy Director, Ms. Adrienne Congo, at 410-764-2965.

BEST REGARDS: Michael Fedorczyk, D.C., Board President

### MARYLAND BOARD OF CHIROPRACTIC & MASSAGE THERAPY EXAMINERS

### RULE MAKING PROJECT: Revision of CO-MAR 10.43.01 et seq. (Chiropractic & Massage Regulations)

The Board of Examiners Regulations Subcommittee has been engaged in a lengthy review project regarding its chiropractic and massage regulations; 3 public meetings were held (advertised online and in MD Register) to which public comments were allowed. The Subcommittee has arrived at an initial draft; major substantive revisions include liberalizing CEU course submission/review requirements for both chiropractic and massage therapy, and defining record keeping requirements for massage therapists. This first draft was reviewed by the Board at the May 9th General Session Meeting. Upon approval, any final revisions were made and final review and vote was taken at a June 20th General Session Meeting, Room 100, 4201 Patterson Ave., Baltimore, MD.

# Status/Update: Proposed Rulemaking Project 10.43 et seq.

Currently, the final review before release for public comments is being conducted by the Legislative AELR Committee and its counsel. Upon approval, the Board will fully publish both the existing regulations with highlighted revised sections in blue and the proposed regulations with prospective revised sections in yellow highlight. This will be uploaded to the Board Website at www.mdmassage.org or www.dhmh.maryland.gov/massage and www.mdchiro.org or www.dhmh.maryland.gov/chiro. It will also be formally published in the Maryland Register. Hopefully, this will make it relatively easy for licensees and registrants to compare and contrast existing provisions with revised sections. There will be a 30 day period for the public to submit comments regarding the regulatory proposal. We anticipate public release for comment may occur in October.

### JURISDICTIONAL LIMITS OF THE BOARD

Every month, the Board receives many questions and request for action. These include requests involving resolving insurance disputes, coding issues, business, corporate and management set-up, civil suits, legal disputes, grievances against patients, vendors and insurers, etc. In fact, the Board has no jurisdiction to act in any of these matters. The following will hopefully clarify the issue of jurisdiction and help licensees and registrants seeking assistance on non-jurisdictional matters.

"Jurisdiction" is what controls the authority of the Board of Chiropractic & Massage Therapy Examiners to get involved in issues and to take certain actions.

In summary, the Board has jurisdiction to: issue licenses, issue registrations, discipline licensees/ registrants, and issue regulations regarding the administration and education of chiropractic and massage licensees and registrants. The Board can entertain relevant questions relating to scope-of-practice, chiropractic devices, record-keeping, professionalism and ethics. It can interpret Chiropractic and Massage Practice Acts, implementing regulations, and policies upon request of licensees and registrants. The Board also has the jurisdictional authority to investigate complaints against licensees and registrants.

Significantly, it cannot take action against nonlicensees and must refer non-licensees practice cases to the cognizant law enforcement authorities. The Board can help clarify its laws and regulations upon request for insurers, attorneys, vendors, etc., however, it cannot become involved in a dispute. It is important to remember that all insurance coverage and coding issues are specifically a mutual contractual matter between the licensee and the insurance company. Accordingly, the Board does not offer opinions or rulings on insurance coverage, payment, coding issues, etc.



### **BOARD'S RESOURCE CORNER**



## What Do the CLAS Standards Mean for Individual Providers?

Monica McCann, MA, MPH
Office of Minority Health and Health Disparities
Maryland Department of Health and Mental Hygiene

### August 2013

In April 2013, the U.S. Department of Health and Human Services, Office of Minority Health released the much anticipated "National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care". The National CLAS Standards were originally released in 2000. The relaunched CLAS Standards signify progress in the state-of-the-art in theory and practice of cultural competency guidelines for health organizations to address health care disparities and enhance health equity.

**The** overarching theme of the National CLAS Standards is to present a blueprint for health care organizations to "provide, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs".

However, the National CLAS Standards hold significance not only for health care organizations, but also for individual licensed health care professionals in Maryland and around the country.

### How Can I Translate the National CLAS Standards to Address My Own Care and Service Delivery Practices?

A clear role for individual health care professionals in implementing the National CLAS Standards is to serve as an advocate for patients and clients within the health care organizations where you work. Both individual and collective advocacy for the health equity and cultural competency principles promoted by the CLAS Standards are necessary in order to adequately address disparities in health care.

Outlined below are several adapted CLAS Standards which provide suggestions for individual practitioners as they champion implementation of the Standards within their organizations.

### Governance, Leadership, and Workforce:

- Using formal channels of communication within your organization, provide recommendations to your organization's decision-makers about the following:
  - Implementation of organizational policies, practices, and resources to promote health equity and delivery of culturally and linguistically appropriate services to patients/clients; and,
  - Recruitment, promotion and support of a culturally and linguistically diverse workforce that reflects and is responsive to the communities being served by the organization.
- Be an active participant in cultural competency training opportunities offered within your organization, and actively seek out additional training opportunities sponsored by other organizations.

### **Communication and Language Assistance:**

- Always use the assistance of trained medical interpreters (in-person or via a telephonic language assistance service) during encounters with patients/clients who have limited English proficiency or other communication needs. (*Refrain from using minors and untrained individuals as interpreters.*)
- Inform patients/clients that language assistance is provided to them at no cost.
- Ensure that signage and frequently used health education materials in your office, or station where you provide services, are easy to understand and available in the primary languages used in the surrounding community.

### Engagement, Continuous Improvement, and Accountability:

### **BOARD'S RESOURCE CORNER**

### What Do the CLAS Standards Mean for Individual Providers? (Page 2)

- Stay informed about your organization's CLAS-related goals and policies, offer suggestions for improving them, and be mindful of how to implement them during individual patient/client encounters.
- Be accountable for quality improvement efforts and recommend ways to incorporate CLAS-related measures into your organization's continuous quality improvement activities.
- Inform all patients/clients about opportunities for them to contribute to your organization's continuous quality improvement process through participation in community needs assessments, focus groups, and similar activities.
- Inquire and stay informed about community resources (formal and informal) that may be helpful as supports to patients/clients self-managing their care.

### Other General Suggestions to Keep In Mind ...

- ✓ Regularly engage in personal reflection regarding one's own biases, cultural values, beliefs and philosophies (both personal and professional) and how they may influence interactions with patients/clients and ultimately affect their response to the care management plan.
- ✓ Seek opportunities, both within your organization and in the community, to learn about the diverse cultural experiences of members of the community being served.
- ✓ Be cognizant of the provider-patient power imbalance and actively develop strategies to listen and communicate with patients/clients in a respectful manner that is non-shaming and non-judgmental.
- ✓ Consider patients/clients and their families as full partners in the decision-making process.
- ✓ As best as possible, tailor services and care delivery to the unique needs of your individual patients/clients.
- ✓ Offer assistance with completing forms, and assume that all patients/clients will have difficulty understanding health information—this is the universal precautions approach to health literacy.

Further information about the National CLAS Standards is available at the following Website: <a href="https://www.thinkculturalhealth.hhs.gov/Content/clas.asp">https://www.thinkculturalhealth.hhs.gov/Content/clas.asp</a>. The Website also hosts several online continuing education modules on cultural competency.

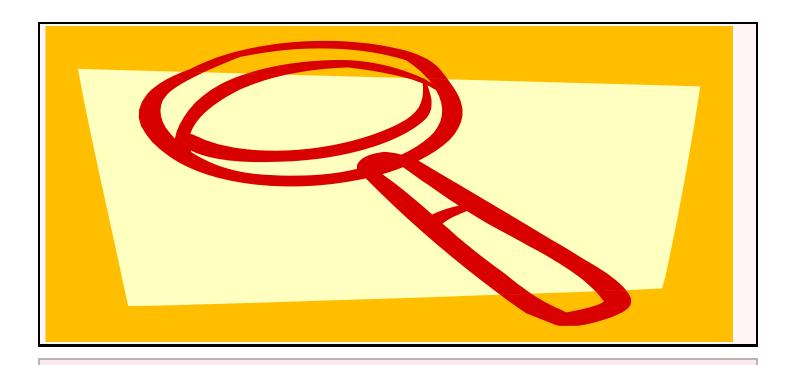
Additional training modules and resources also can be found in the Cultural Competency and Health Literacy Primer published in March 2013 by the Maryland Office of Minority Health and Health Disparities (MHHD) and the University of Maryland School of Public Health. The Primer and other resources can be accessed on the MHHD Website: <a href="http://dhmh.maryland.gov/mhhd/SitePages/Home.aspx">http://dhmh.maryland.gov/mhhd/SitePages/Home.aspx</a>

#### References:

McCann M., Carter-Pokras O., Braun B., Hussein C. *Cultural Competency and Health Literacy Primer*. Maryland Office of Minority Health and Health Disparities and the University of Maryland School of Public Health, March 2013. <a href="http://dhmh.maryland.gov/mhhd/CCHLP">http://dhmh.maryland.gov/mhhd/CCHLP</a>

National Center for Cultural Competence, Georgetown University. Conceptual Frameworks/Models, Guiding Values and Principles. http://nccc.georgetown.edu/foundations/frameworks.html#ccdefinition

U.S. Department of Health and Human Services, Office of Minority Health. National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care. April 2013. <a href="https://www.thinkculturalhealth.hhs.gov/Content/clas.asp">https://www.thinkculturalhealth.hhs.gov/Content/clas.asp</a>



#### BOARD MASSAGE COMPLIANCE INITIATIVE CONTINUES WITH PRO-ACTIVE ENFORCEMENT

The Board has worked diligently and in cooperation with local law enforcement authorities to close unlicensed practices. Over the past months, the police have been especially diligent in responding to reports and mall managers have been cooperating in shutting down practices engaged in massage therapy without licensed therapist/practitioners. However, again, we must remind licensees and registrants that the Board DOES NOT have jurisdiction in these cases. Illegal massage or chiropractic practice is a criminal violation punishable by fine and/or imprisonment. The board administratively assists the police in providing information and license/registration verification services to the arresting officer and prosecutor.

If you are aware of an unlicensed or unregistered practice; CALL THE POLICE and file a report. Illegal massage practice takes money out of the pockets of license/registered practitioners. It also demeans the healthcare practice of massage.

### **BOARD MEMBERS TO ATTEND VARIOUS CONFERENCES AND PROGRAMS**

The Board annually sends members and staff to specific meetings and conferences to expand their knowledge and acumen regarding aspects of their duties and responsibilities. Cost for these programs are annually submitted as part of the Board's budget and must be cleared under strict guidelines by DHMH and the Office of General Accounting.

The Board President, Dr. Michael Fedorczyk, D.C. and the Vice -President, Dr. Jonathan Nou, D.C. will attend the Federation of Chiropractic Licensing Boards (FCLB), District III Regional Meeting, September 20th and 21st. Many national and regional issues will be discussed and considered. Note: The Federation of State Massage Therapy Boards (FSMTB) is the counterpart to the Chiropractic FCLB and deals with both national and regional issues of importance regarding Massage Therapy. The 2013 Board Delegate, David Cox, LMT and Board Member, Gwenda Harrison, LMT will be attending the 2013 Annual Conference held October 10-12th at the Sheraton Inner Harbor Hotel, Baltimore, Maryland.

### LATEST ELECTRONIC & TECHNOLOGY INITIATIVES

The Board has fully transitioned its websites to include the most recent data uploads. Now, licensees can view all disciplinary summaries, newsletters, laws, regulations, scope of practice bulletins, access to renewal information and online licensing. The Board has also implemented an online broadcast messaging system (iContact) that will broadcast Board bulletins to all licensees/registrants whom provided the Board with an email address simultaneously via email. Last year, the Board and all DHMH offices had transitioned to business Google mail for all electronic correspondence. Last Spring, the Board began uploading copies of all disciplinary orders to the website for viewing and downloading by the public. All of the foregoing are enhancements to communications and service to the massage therapy community.

### MASSAGE THERAPY LICENSURE TIMELINES & STATUS CATEGORIES

### **BIENNIAL RENEWALS**

All Maryland Massage Therapists and Massage Practitioners licenses and registrations will expire October 31, 2014. Information regarding the renewal of the licenses and registrations will be forthcoming in the late spring of 2014 and posted on the Board's website (www.mdmassage.org or www.dhmh.maryland.gov/massage). License and Registration Renewals are strictly completed online through the Board's website and during the specified 'Open Renewal and Open Late Renewal' days.

### ACTIVE AND ACTIVELY IN AN 'INACTIVE STATUS' RENEWAL

All active and inactive license and registration holders must renew their respective status every biennial renewal window (every two years-on the even years) regardless of the original or initial date of licensure. If a licensee or registrant receives a license or registration 12 months or less from the expiration date printed on the license or registration; the licensee or registrant is exempt from continuing education requirements only during that renewal. Note: licensees and registrants should confirm their current licensure status by either going to the website and clicking on the 'verification link' located on the homepage in the 'Online Services' box or contacting the Board.

### INACTIVE STATUS—REACTIVATION (\$386.00 LMT—\$350.00 RMP)

Licensees and Registrants who are actively 'inactive' may reactivate a license or registration at anytime (keeping in mind the timing with the biennial renewal to which a licensee or registrant may not have the benefit of a full two years). The licensee or registrant may download the 'Reactivation Application' located on the Board's website under the "Form' tab and remit into the Board the completed application, copies of the required regulatory CEUs and a copy of the a valid CPR certification for the workplace. Note: licensees and registrants should confirm their current licensure status by either going to the website and clicking on the 'verification link' located on the homepage in the 'Online Services' box or contacting the Board.

### NON-RENEWED STATUS—REINSTATEMENT (\$686.00 LMT—\$650 RMP)

Licensees and Registrants who are in a non-renewed status for less than 24 months and wish to reinstate their license or registration; may download the "Reinstatement Application' located on the Board's website under the "Form' tab and remit into the Board the completed application, copies of the required regulatory CEUs and a copy of the a valid CPR certification for the workplace. Note: licensees and registrants should confirm their current licensure status by either going to the website and clicking on the 'verification link' located on the homepage in the 'Online Services' box or contacting the Board.

### NON-RENEWED STATUS—REAPPLICATION

Licensees and Registrants who failed to renew a license or registration within 2 years after expiration date of the license or registration shall meet the regulatory requirements currently in effect at the time of request and make reapplication to the Board for licensure. Note: licensees and registrants should confirm their current licensure status by either going to the website and clicking on the 'verification link' located on the homepage in the 'Online Services' box or contacting the Board.

### ADMINISTRATIVE FLAG(S) —EITHER TAX DELINQUENCY, CHILD SUPPORT DELINQUENCY, FAILURE TO NOTIFY BOARD OF A CHANGE OF ADDRESS WITHIN 60 DAYS OF MOVING

If you have been flagged by the MD State Office of Comptroller for state tax or Child Support Enforcement Office for child support delinquencies; you will be notified by the Board at the address on file and will not be allowed to complete renewal unless/until you satisfy the delinquency with the Comptroller of CSE. If you fail to notify the Board of a change of address in writing and by mail within 60 days of the change; you shall be assessed a \$100 administrative penalty.

### MASSAGE THERAPY BIENNIAL RENEWAL INFORMATION - DEADLINE IS OCTOBER 31, 2014

#### **IMPORTANT TIMELINES FOR 2014**

Online Biennial Renewal will open live approximately August 2014 and will run through October 31, 2014. Late renewal will begin November 1, 2014 and close November 31, 2014. December 1, 2014 the Biennial Online System will close. Any licensee or registrant who has not renewed his/her license or registration or licensure status by November 31, 2014 will automatically become a category status of Non-Renewed on December 1, 2014.

#### **WALK-INS**

In order to facilitate audit tracking and fiscal procedures recently implemented by the Office of Legislative Audits, the Board must insist that all correspondences such as: applications, payments, documentation inclusive of audits be submitted by mail or messenger service with the exception of completing the Biennial Online Renewals. Unless special circumstances are approved by the Board, all business must be transacted via mail service. Of course any licensee/registrant may make an appointment to personally come in and discuss any relevant issue with the Massage Program Manager. Information may also be obtained and questions promptly answered via phone or email.



# TAX OR CHILD SUPPORT DELINQUENCIES WILL DELAY YOUR ABILITY TO RENEW YOUR LICENSE OR REGISTRATION HAVE YOU PAID YOUR STATE TAXES?

Maryland law requires that anyone who qualifies for a renewal license, certificate or registration must be current with state taxes and/ or child support payments prior to the issuance of the renewal license, certificate, or registration. THIS MEANS THE BOARD CANNOT ISSUE A RENEWAL LICENSE, CERTIFICATE OR REGISTRATION UNLESS ALL TAX OBLIGATIONS AND/OR CHILD SUPPORT OBLIGATIONS TO THE STATE ARE PAID OR AN AGREEMENT HAS BEEN MADE TO CURE THE TAX / CHILD SUPPORT DEBT— THERE ARE NO WAIVERS OR EXCEPTIONS.

**NOTE:** The Board cannot intervene in any delinquent tax or child support matter unless the licensee or registrant has reason to believe there has been an error on the Board's part. It is the responsibility of the licensee or registrant to contact the Comptroller's Office to resolve any outstanding issues/matters of the State of Maryland prior to renewing a license or registration online during the Biennial Renewal window. The Comptroller's Office will then notify the Board via email of a clearance status for your license or registration; then and only then will you be able to proceed with the renewal process.

THE BOARD MUST ADHERE TO THE REGULATION AND CANNOT MAKE ANY EXCEPTIONS!

Refer to COMAR 10.31.02.02

### **CHANGE OF ADDRESS NOTIFICATION REQUIREMENT**

A "Change of Address" is to be submitted every time a licensee or registrants changes mailing address. The Board regulations require all licensees and registrants to maintain a current address with the Board. The licensee and registrant shall notify the Board of any change in the name or address of the license or registration holder, in writing, within 60 days after the change occurs. You may make notification in writing by U.S.P.S. mail, by fax (410) 358-1879, or by simply completing and mailing to the Board the "Change of Name/Address" card connected to the wallet portion of your license or registration.

THERE IS A \$100.00 ADMINISTRATIVE PENALTY FOR FAILURE TO MAINTAIN A CURRENT ADDRESS WITH THE BOARD!

Refer to COMAR 10.43.17.12

UNIT 83
MD BOARD OF CHIROPRACTIC &
MASSAGE THERAPY EXAMINERS
4201 Patterson Avenue, Suite 301
Baltimore, MD 21215-2299



REMEMBER TO CHECK THE BOARD'S WEBSITE FOR UPDATES AND BULLETINS

REQUEST FOR RESTRICTION OF EMAIL A	DDRESS FROM RELE	ASABLE DATABASE ROSTER	
I,			
Signature	date		
Mail to: MD Board of Chiropractic & Massage Therapy Examiners 4201 Patterson Avenue, Baltimore, MD 21215-2299.	s, 4201 Patterson Avenue, S	uite 301, Baltimore, Maryland 21215	
All licensees and registrants must notify the Failure to do so will result in the assessme	nt of a \$100.00 fine p		
		, effective on:	
, 20 I understand that upon receip	ot of this form, my official	mailing address will be changed in my	
Massage Therapy file and in the licensee database.			
	Print Name		
Mail to: Board of Chiropractic & Massage Therapy Examiners Suite 301 4201 Patterson Ave. Baltimore, MD 21215-2299 Attn: Ms. Emily Jones	Signature	Date	