



**BOARD OF CHIROPRACTIC EXAMINERS
LICENSING COMMITTEE
MEETING MINUTES
March 8, 2024**

The Licensing Committee (Committee) of the Board of Chiropractic Examiners (Board) met via teleconference/Webex Events on March 8, 2024, in accordance with the provisions of Government Code section 11123.5. Board staff were present at the primary physical meeting location listed below and all Committee members participated virtually from remote locations.

Primary Physical Meeting Location

Department of Consumer Affairs
Monterey Room
1625 N. Market Blvd., Suite N-322
Sacramento, CA 95834

Committee Members Present

Pamela Daniels, D.C., Chair
Janette N.V. Cruz

Staff Present

Kristin Walker, Executive Officer
Tammi Pitto, Assistant Executive Officer
Dixie Van Allen, Licensing & Administration Manager
Amanda Ah Po, Enforcement Analyst
Sabina Knight, Board Counsel, Attorney III, Department of Consumer Affairs (DCA)
Steven Vong, Regulatory Counsel, Attorney III, DCA

1. Call to Order / Roll Call / Establishment of a Quorum

Dr. Daniels called the meeting to order at 12:01 p.m. Ms. Cruz called the roll. All members were present, and a quorum was established.

2. Review and Possible Approval of August 25, 2023 Committee Meeting Minutes

This agenda item was tabled for a future meeting.

3. Update on Board's Licensing Program

Ms. Pitto announced that the next Board meeting has been scheduled for May 23–24, 2024, via Webex. She updated the Committee on the Board's business modernization project and implementation of the Connect system and shared the PDF application submittal and workflow processes were updated through a recent software release on

February 29, 2024. She indicated the updates allow users to view the status of their application submissions from their user dashboard.

She explained two bills that may affect the Board's Licensing Program were recently introduced: Assembly Bill (AB) 2862 (Gipson) would require boards to prioritize African American applicants seeking licenses, especially applicants who are descended from a person enslaved in the United States; and Senate Bill (SB) 1067 (Smallwood-Cuevas) would require each healing arts board to develop a process to expedite the licensure process by giving priority review status to the application of an applicant who demonstrates that they intend to practice in a medically underserved area or serve a medically underserved population.

She added the Board has nine proposed regulations that affect the Licensing program—two are in the production phase and seven are in the concept development phase. She also shared that staff has been working with a new liaison from DCA's Office of Public Affairs (OPA) to create graphics and develop new content for the Board's social media accounts.

Ms. Cruz referenced the Board's 2022–2026 Strategic Plan Objective 1.2 to establish a robust, effective Licensing Committee to identify issues and increase efficiency, and suggested staff consider further defining the task descriptions within the action plan for the objective to better reflect the progress that has been made in this area. Ms. Walker agreed and shared that the remaining action items for that objective are to present the remaining regulatory proposals to the Committee for consideration and fill an analyst position to serve as the Committee's staff liaison.

Dr. Daniels thanked staff for their work on the Connect software release and asked if licensees are using the functionality and storing their continuing education (CE) records in the system. Ms. Walker offered to gather the utilization rate and report back to the Committee. She added licensees were initially required to upload proof of their CE during the renewal process in Connect, but that requirement was later removed because it was impeding licensee use of the online renewal process. She explained the current CE record storage functionality on the user dashboard is intended to be a convenient, but optional, tool for licensees, while staff proceeds with developing additional functionality to allow for primary source verification of CE records directly from the Board-approved CE providers and to have those records automatically sync with licensees' user dashboards.

Dr. Daniels asked about the status of notifying licensees of their ability to renew online. Ms. Walker stated staff discussed creating a targeted campaign to encourage online renewal with the Board's representative from OPA. Ms. Cruz asked about the prioritization of content for the Board's website and social media accounts. Ms. Walker indicated staff is developing evergreen content such as reminders to check the license, create a Connect account, and renew online. She added that well over 80 percent of new applicants are applying for their license online, so the Board needs to further

encourage existing licensees to utilize Connect, such as by potentially phasing out the mailed renewal applications with a postcard or other reminder notice to renew online. Dr. Daniels noted the need to maintain a backup method of renewal for licensees who do not have internet access. Ms. Walker stated the Board will also continue to maintain a PDF renewal application that can be downloaded from the Board's website, and staff can fax or mail the form to a licensee who does not have internet access.

Dr. Daniels asked if there is any estimated fiscal impact with the implementation of AB 2862 (Gipson) or SB 1067 (Smallwood-Cuevas). Ms. Pitto indicated staff does not anticipate a fiscal impact from either bill.

Dr. Daniels asked why the regulatory proposal to implement SB 1434 (Roth, Chapter 623, Statutes of 2022) is still pending in the production phase. Ms. Walker replied the extended timeframe is due to a capacity issue at the staff level. She noted staff is working to catch up on the volume of regulatory proposals that have been approved by the Board and need to be noticed with the Office of Administrative Law and released for a public comment period.

Dr. Daniels asked if the regulatory proposal regarding temporary licensure for military spouses and domestic partners relates to the issue of reciprocity. Ms. Walker explained the Board must provide temporary licenses to qualified military spouses and domestic partners, but they must still meet all of the Board's requirements before they can obtain a permanent license. She added there is also a new federal license portability law that authorizes military members and their spouses who are licensed in another state to practice without obtaining a license when they relocate due to military orders.

Dr. Daniels noted a downward trend in the number of licenses issued and renewed through fiscal year 2023–24. Ms. Walker concurred and explained the Board's license population has been slowly decreasing over time.

Public Comment: None.

4. Review, Discussion, and Possible Recommendation Regarding Regulatory Proposal to Update the Requirements for Filing Places of Practice with the Board and Notifying the Public of Licensure at Practice Locations and in Mobile Settings (add California Code of Regulations [CCR], Title 16, section 303.1 and amend CCR, Title 16, section 308)

Ms. Walker introduced this agenda item and stated there was a pending Consumer Protection Enforcement Initiative (CPEI) proposal to implement a requirement for a mandatory notice to consumers at all practice locations. She noted the Committee engaged in a robust discussion about modernizing the consumer notice requirement at the August 25, 2023 meeting and eliminating potential redundancies from the original CPEI proposal.

She presented staff's proposal to potentially phase out the use of satellite certificates and replace them with facility-level permits for physical practice locations that provide more information about a practice to the public and to the Board such as the name of the practice, a designated doctor in charge, and a list of all licensees practicing at the facility. She added the permits could be transferrable between licensees, but not to different addresses, and explained how the permits would be reflected in the Board's database and the DCA Search public license information website.

Dr. Daniels commented that a significant amount of regulatory language will need to be developed to specify and clarify the requirements for the proposed permits. Ms. Cruz asked if all permits would be linked to the licensee's profile if they work at multiple locations. Ms. Walker responded affirmatively. Dr. Daniels noted the need to ensure there are no delays in transferring licensees from different practice settings, so patients are able to locate the licensee who treated them when reviewing the permit information.

Ms. Walker also requested the Committee's input on proposed regulations for displaying license information in mobile and temporary practice settings and whether licensees should be required to provide any type of electronic notice or post-care instructions.

Dr. Daniels commented that the license and QR code should be displayed in a manner that allows the patient to access the information without having to ask. Ms. Cruz agreed.

Ms. Walker indicated staff will develop a conceptual proposal and draft regulatory text for the Committee's review at a future meeting.

Public Comment: None.

Dr. Daniels asked staff to also gather stakeholder suggestions and feedback on the proposal.

5. Review, Discussion, and Possible Recommendation Regarding Regulatory Proposal to Specify the Prohibited Activities for Inactive Licenses (add CCR, Title 16, section 310.3)

Ms. Pitto presented a conceptual draft of language to add CCR, title 16, section 310.3 to specify the activities that cannot be performed by the holder of an inactive license and requested the Committee's input.

Ms. Cruz expressed her support for the proposal. Dr. Daniels concurred and suggested further review of the use of the phrase "independently conducting" to ensure there are no unintended loopholes associated with that language. She also opined that licensees should be required to complete more than 24 hours of CE to reactivate their license from inactive status. Ms. Walker noted the Board cannot change that requirement because it is in the statute, and suggested the Board could consider raising that concern during the next sunset review. Dr. Daniels explained 24 hours of CE is insufficient to protect the public because it does not provide sufficient training to bring a

licensee back up to speed on their technical and psychomotor skills, documentation requirements, and other regulations.

Motion: Dr. Daniels moved to recommend that the regulatory proposal to add California Code of Regulations, title 16, section 310.3 be presented to the Board for consideration.

Second: Ms. Cruz seconded the motion.

Public Comment: None.

Vote: 2-0 (Dr. Daniels-AYE and Ms. Cruz-AYE).

Motion: Carried.

6. Review, Discussion, and Possible Recommendation Regarding Proposal to Update the Regulations for Board Approval of Doctor of Chiropractic Degree Programs (amend CCR, Title 16, sections 330–331.16)

Ms. Walker explained the Committee has been developing regulatory language to amend the Board's requirements for doctor of chiropractic degree programs, and the Council on Chiropractic Education (CCE) recently completed a three-year process to update their accreditation standards beginning in January 2025. She noted staff compared the Board's requirements for approving chiropractic programs to the CCE accreditation standards and identified potential methods to eliminate redundant requirements and simplify the application process for Board approval by reviewing the program's CCE self-study and inspection reports rather than requiring the program to draft a separate report for the Board's review. She also suggested the Board consider obtaining primary source documentation directly from CCE rather than requesting it from the program.

Dr. Daniels expressed her support for simplifying the requirements for the chiropractic programs but noted the potential staff workload with obtaining the documentation from CCE. She emphasized the Board's goal of streamlining the curriculum requirements for chiropractic programs but noted the constraints due to the schedule of curriculum found in Section 5 of the Chiropractic Initiative Act of California (Act). Ms. Walker concurred and explained with Section 5 of the Act, the Board can interpret and make it more specific through regulations, but the Board cannot disregard the schedule of educational requirements or implement a regulation that conflicts with that section. Dr. Daniels also shared that a new chiropractic program at the University of Pittsburgh requires eight terms.

Ms. Walker identified additional redundancies in the Board's regulations regarding ensuring the chiropractic program has the proper institutional accreditation because CCE is already verifying institutional accreditation as one of the requirements for program accreditation. She also recommended keeping the language in CCR, title 16,

section 331.14 that provides the Board with authority to disapprove any program if, in the opinion of the Board, the quality of instruction is not sufficiently high to meet the objective of the Act or the Board's regulations.

Dr. Daniels suggested aligning the Board's regulations with CCE's language for sanctions and noncompliance actions. Ms. Cruz noted the Board may need to specify a minimum timeframe for the retention of records.

Public Comment: Ana Facchinato, D.C., Dean of the Los Angeles College of Chiropractic (LACC), thanked the Committee and staff for their work on the chiropractic program regulations and stated the changes are a step in the right direction to help the chiropractic colleges.

Dr. Daniels encouraged staff to complete the regulatory language for the chiropractic programs and curriculum requirements and suggested establishing a working group meeting to develop that language.

7. Public Comment for Items Not on the Agenda

Public Comment: None.

8. Future Agenda Items

Dr. Daniels requested future agenda items to discuss reciprocity, temporary licensure for military spouses and domestic partners, and CE requirements and competency assessments for the reactivation of an inactive or cancelled license.

Public Comment: None.

9. Adjournment

Dr. Daniels adjourned the meeting at 1:41 p.m.