



## Legislative Fact Sheet

### *Clarifying the Practice of Chiropractic*

#### **HF 319 – Rep. Jordan Rasmusson (R) District 08A**

*Reps. Erin Koegel (DFL) District 37A; Laurie Pryor (DFL) District 48A;  
Liz Reyer (DFL) District 51B*

#### **SF 266 – Sen. Mark W. Koran (R) District 32**

*Senators John A. Hoffman (DFL) District 36;  
Matt D. Klein (DFL) District 52; Jim Abeler (R) District 35*

1. This legislation revises the statute under which chiropractic doctors conduct their practices while providing care to patients in the State of Minnesota, by:
  - **Adding a provision for the delivery of telemedicine services**
  - Reorganizing the section related to animal chiropractic
  - Adding a second provision authorizing the Board of Examiners to discipline a chiropractor who fails to follow executive orders adopted by the governor, as an alternative to criminal penalties
2. The COVID-19 pandemic has accelerated the use of telemedicine services by healthcare providers due to concerns among both patients and providers regarding the safety of in-person visits. The **expansion of telemedicine will undoubtedly continue** post-pandemic.
3. Chiropractic doctors provide physician-level, primary care services to patients with a wide range of health problems, including **consultation; examination; diagnosis; treatment and patient management; and referral to and from medical specialists and diagnostic imaging centers.**
4. While the manual therapies chiropractic doctors provide are in-office procedures, virtual or telemedicine visits provide an effective and convenient way for clinicians to **communicate with patients about their symptoms, progress, and compliance** with self-care recommendations.
5. Using technology for virtual visits, chiropractic doctors provide coaching and other assistance to patients regarding at-home exercises which are clinically effective in the management of back pain and other musculoskeletal disorders.
6. Telemedicine is an advantage in case management for patients who have difficulty accessing care (e.g., those who live in very rural communities, older adults, those with limited mobility).

**Please support HF 319 and SF 266 by signing-on as a co-author.**