



March 6, 2025

Re: Montana HB500

I hope this note finds you well. I understand that there is a Montana bill (HB 500) being discussed tomorrow that would allow chiropractors to prescribe medications.

Prescribing medications has never been within the scope of chiropractic care. It is and should continue to be outside of our scope of practice. Chiropractors are not trained to prescribe medications and our primordial introduction into pharmaceuticals as students in no way prepare chiropractors to be the prescribers of medication. MDs and their auxiliary specialties are well-trained in pharmacology and the proper use of drugs, and that portion of medical care should remain the domain of medicine. Chiropractors have no business being in that area of care. Drugs of all kinds represent a potential danger to patients and patients deserve to have the most qualified/trained professionals overseeing the prescribing of drugs. A weekend-style course which ultimately allows chiropractors to participate in the drug prescribing business seems risky, at best. Medical doctors study hundreds of hours in pharmacology and related topics to have the opportunity to prescribe medications. They understand the desired effects, side effects, contraindications, possible addictions, and safety issues related to prescription medication.

Chiropractors are highly trained (nearly 4 years) at the analysis of the spinal structure and its effects on the nervous system when vertebra may be misaligned. That is our scope of practice. We are not qualified, nor should we be trained in an area that is already addressed by other well-trained professionals.

We at Sherman College of Chiropractic vehemently oppose this bill and hope that the lawmakers will see the risk/danger in this matter.

Respectfully,

Jack M. Bourla, D.C., A.C.P.
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March 6, 2025

Dear Members of the Montana Legislature,

I write to you today with deep concern and strong opposition to HB 500. As the President of Life Chiropractic College West in Hayward, California—one of the largest chiropractic colleges in the Western United States—and with a second college in Omaha, Nebraska, I am frequently asked for my professional opinion on matters regarding the expansion or restriction of chiropractic scopes of practice. This perspective is informed by both my extensive experience in chiropractic education and public safety, as well as my 44 years as a licensed chiropractor, including 36 years in active practice. As a licensed chiropractor and resident of the great state of Montana, I urge you to vote **NO** on HB 500.

For over 35 years, various states have attempted to expand the scope of chiropractic practice to include the prescription and administration of pharmaceuticals—efforts that have been consistently rejected. These proposals have been voted down for several critical reasons, which I will outline below:

1. Insufficient Training and Educational Challenges

The healthcare system already has highly trained medical doctors (M.D.s and D.O.s) who specialize in prescribing and administering pharmaceuticals, with years of rigorous education dedicated to this responsibility. Chiropractic education, as governed by the Council on Chiropractic Education (CCE), mandates 4,200–4,400 hours of training. Given this structured curriculum, there is no feasible way to integrate the extensive coursework required for a pharmaceutical prescription without significantly increasing educational costs and extending the length of chiropractic programs. Such changes would impose a financial burden on students and institutions alike, necessitate additional national board examinations, and dramatically increase malpractice insurance costs due to the inherent risks associated with prescribing medication.

2. Public Safety Risks

Patient safety must be the foremost consideration when contemplating any expansion of a healthcare provider's scope of practice. A 2024 article published by Renew Bariatrics, titled Medication Error Statistics and Figures: How Prevalent are Medication Errors? highlights alarming statistics:

- 20% of medication errors result from incorrect dosages
- 15% involve the wrong drug
- 10% occur due to incorrect timing

These errors occur within a profession where prescribing medications is a core competency. Introducing prescription rights to a profession without extensive pharmacological training would only increase these risks, potentially endangering public health. Proponents of HB 500 underestimate the complexity of pharmaceutical

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prescribing, the demands this would place on chiropractic institutions, and the risks to patients when medications are prescribed without the depth of medical training required to do so safely.

3. Preserving the Integrity of Chiropractic and Meeting Public Expectations

Patients seek chiropractic care precisely because it offers a natural, drug-free approach to health. In a study commissioned by the Association of Chiropractic Colleges, one of the top reasons students choose chiropractic as a profession is its emphasis on holistic, non-pharmaceutical care. Chiropractic has played a significant role in reducing dependency on opioids by providing natural pain management alternatives. Expanding prescription rights contradicts the very philosophy that defines chiropractic and would erode public trust in the profession.

Furthermore, as policymakers and healthcare leaders work to curb excessive pharmaceutical use and limit direct-to-consumer drug advertising, it is counterintuitive to expand prescribing rights to a profession historically rooted in non-pharmacological care. The long-term health of our communities is better served by promoting wellness and preventative care—not increasing access to pharmaceuticals through providers who lack extensive medical training in their use.

Some may argue that expanding chiropractic scope enhances educational opportunities, but this ignores the significant financial and logistical burdens such expansion would impose. Others may claim that allowing chiropractors to prescribe medications serves the public interest; however, evidence and experience suggest otherwise. I am confident that if you consulted the Montana Medical Association or similar organizations, they would echo these concerns.

Chiropractic has been a drug-free profession since its inception in 1895, focusing on neuro-structural health and natural healing. Chiropractors are uniquely trained to optimize health through spinal care, nervous system function, and lifestyle education. If a chiropractor wishes to prescribe medication, the appropriate path is medical school—not a legislative expansion of chiropractic scope.

In conclusion, while the intent behind HB 500 may be to expand healthcare access, it does so in a way that compromises public safety and the fundamental principles of chiropractic care. I strongly urge you to oppose this bill and preserve the integrity of a profession that has long provided safe, effective, and natural healthcare solutions to the public.

Sincerely,



Dr. Ron Oberstein
President, Life Chiropractic College West
Licensed Chiropractor, State of Montana

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PALMER

College of Chiropractic

Chancellor and CEO

March 4, 2025

To Whom It May Concern,

As Chancellor and CEO of the oldest and largest College of Chiropractic in the world, I am writing to express opposition to the expansion of prescription pharmaceuticals into the clinical scope of chiropractic practice.

The chiropractic profession was founded in 1895 in Davenport, Iowa. Palmer College of Chiropractic was chartered soon after, in 1897. Today, more than one-third of all practicing Doctor of Chiropractic (DCs) in the United States, and a significantly portion of chiropractors worldwide, are Palmer College graduates. Throughout Palmer's long history, we have worked closely with our graduates and various regulatory bodies to create the very best professional circumstances to ensure exemplary care for patients everywhere.

Palmer spent years researching and carefully crafting an identity for chiropractors as: *The primary care professionals for spinal health and well-being*. We also created a practice paradigm that begins: *Chiropractic focuses on neurological and musculoskeletal integrity, and aims to favorably impact health and well-being, relieve pain and infirmity, enhance performance, and improve quality of life without drugs or surgery*. For more information on our identity, see www.palmer.edu/our-identity.

To achieve our shared goal of enhancing public health by addressing the global burden of spinal-related disease, we need an identity, a focus, and a scope of care that is evidence-based, clearly understood, and embraced by health care consumers. We contend that Palmer's identity, which includes primary spine care along with wellness, does exactly that -- without drugs or surgery.

Sincerely,

Dennis Marchiori, D.C., Ph.D.
Chancellor