

## President's Message

Hello UVCA Members!

Welcome to 2022.

Although we are starting off with another crazy year with Omnicron, The No Surprises Act, and snow (including here at the beach!), the UVCA is off and running to help make your year a great one! We have our Strategic Planning Meeting on Saturday, February 5<sup>th</sup> in Richmond where your UVCA leadership and other various members get together to identify and prioritize goals for the upcoming year and determine how to achieve them. These goals enhance our profession in the state of Virginia and improve our membership, as well as strengthen our association.



We are always looking for feedback regarding your membership, conferences, and ideas as to what would improve our association. You know those surveys we send out on DocTalk and e-blast? They provide us with a lot of good information.

We are here for you. We want to make the UVCA the best it can be. If there is anything you think we should know or look into, please reach out to your Board and UVCA staff.



Dr. Michelle Rose  
UVCA President

## Discover Insurance Tips

We've found that quite a few members are not aware of the in-depth, professionally written articles and white papers that UVCA IC Mr. Dale Jackson has produced for you over the years. In case you're in that group, here's a list of the Tips currently on the UVCA website for members (under Tools & Resources > Insurance > Insurance Tips Publications). Check 'em out!

- Cybersecurity Protection for Chiropractic Offices
- Guidelines for Handling Rejections of Assignments of Benefits Contracts in Personal Injury Cases
- Growing Your Revenue
- Prioritizing Your Practice Insurance Coverage
- Developing a Financial Policy That Will Reduce Accounts Receivable and Increase Cash Flow, Revenue and Profit
- Introducing and Promoting the Benefits of Chiropractic Healthcare to Local Businesses and Community-Based Organizations
- Strategies for Getting a Foot in the Door with Businesses to Present Your Chiropractic Health Plan and Injury Prevention Program

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## Supporting Supplier News



ChiroUp recently published its 2021 Chiropractic Clinical Outcomes and Patient Satisfaction Synopsis. This groundbreaking paper illustrates how you compare to other providers re: clinical results, patient satisfaction, cost-effectiveness, and safety. This paper will make you proud to be a DC plus features graphics that are simple to share with your patients, social media, and healthcare decision-makers. Visit <https://chiroup.com/copssynopsis2021/>.



Perla is pleased to announce its partnership with the District of Columbia Behavioral Health Association and the Healthcare Council. The Perla Platform and Perla Advisor Network will soon be accessible to these institutions' administrators and clinicians through the organizations' websites. Perla is also pleased to announce its corporate membership with the Maryland Pharmacists Association and Medical Group Management Association. If you'd like to learn about becoming a Perla advisor, check out <https://www.goperla.com/advisor>.



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Stirling Oils was recently asked by Chiropractic Economics to write an article in response to the January 11<sup>th</sup> watershed article in Forbes about how a CBGA/CBDA Combination prevents Covid. For a preview of that article, see page 16.

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# Aging Dysfunction of the Immune System

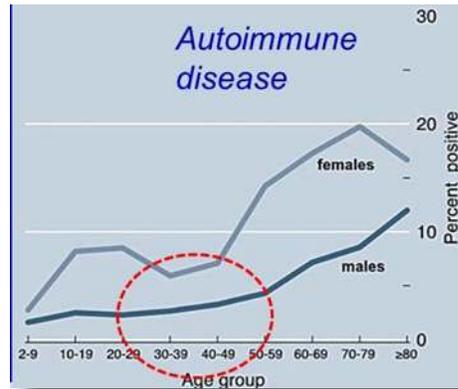
## Targeting Prime Driver of Chronic Inflammation with Laser Therapy

Scott Banks, DC, MS

Most practitioners dealing with musculoskeletal disorders have a repertoire of anti-inflammatory therapies. First and foremost is spinal adjusting or correcting the acute problem which drives it. From there we often add other tools such as laser therapy, ice and herbs such as turmeric. Even with that, there remains a significant population of patients who have persisting symptoms related to chronic inflammation. Targeting areas other than the site of pain and inflammation such as the thymus with laser therapy is often helpful.

This chronic inflammation is known to associate with “immunologic age” and has been termed inflammaging. A key point is that “immunologic age” and chronologic age do not directly correlate. Immunologic age is the result of both chronologic age and life related stressors on the immune system. As with all body systems, a decline in function suggestive of the beginning of aging, typically begins in the immune system between the third and fourth decades as it does in other systems with high cell turnover.

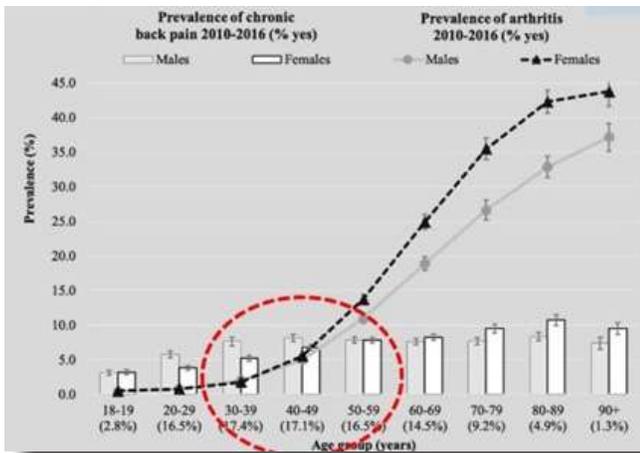
Immune aging results in two distinct but related phenomenon, inflammaging and immune-senescence. This combination is in essence, an overactive innate immune system with an underactive and dysfunctional acquired immune system. Studies examining inflammatory markers demonstrate a progressive increase with age. Inflammation is a significant part of most of the diseases that progressively have an increased prevalence from mid-life on. It is also a primary component of almost all musculoskeletal disorders that are managed in the chiropractic office.



antigens are termed DAMPs or damage associated molecular patterns. These are “cleaned up” by macrophages as are infectious organisms. Some of them will be presented to the adaptive immune cells who may have a receptor that matches that self-

tissue antigen generating an inflammatory T cell reaction against that tissue. It may also cause a B cell antibody reaction which can lead to autoimmunity or “immune against self”.

The 39-year-old patient with some mild/moderate disc degeneration presents more DAMPs and thus is at more risk of autoimmunity. The age relationship between back pain and *Continued on page 4*



This progressive increase in back pain and arthritis for example, begins to increase significantly between the third and fifth decades and not simply in the elderly. This increased prevalence parallels the increasing inflammatory markers seen in the same age demographics.

Immuno-senescence is a progressive weakening of the immune defenses. It is associated with the elevated risks of adverse outcomes and deaths from infections, progressively increased rates of many cancers and increased prevalence of autoimmune disease with progressive age. Again, these increasing prevalence rates begin in the third decade of life and increase steadily with progressive age.

Over time, the immune system is progressively exposed to greater numbers of antigens from self-tissue. These are liberated during injury, infection and with degenerative change. These self-tissue

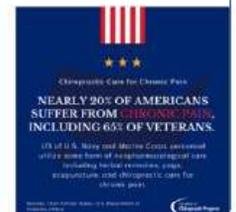


The Foundation for Chiropractic Progress is proud to announce the launch of the Military Toolkit, a brand new toolkit to equip your practice with the resources needed in order to treat and educate both Veterans and active-duty military personnel on chiropractic care.

With a mixture of internal and external content, this toolkit has everything you need to run a successful campaign to educate the public, and your staff, on the chiropractic benefits available to both Veterans and active-duty military personnel. A few examples appear below.

To opt in and take advantage of the UVCA's Group Membership in the Foundation:

1. Go <https://www.f4cp.org/opt-in/> or reach out to Marta Cerdan, the Foundation's Membership Director: phone 866-901-3427 x 1, email [marta@f4cp.com](mailto:marta@f4cp.com).
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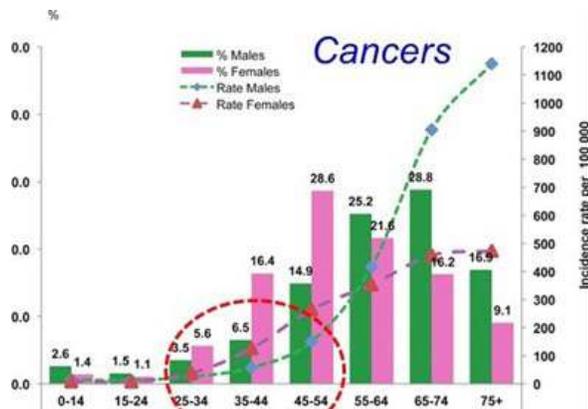
**Brad Schardein**

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Continued from page 3 arthritis seen in the prior figure is similar to that seen in autoimmune disease.

An innate immune cell, a natural killer cell, and adaptive immune T cells also play an important role in eliminating abnormal cells such as cancer cells. Progressive weakness in that immune function parallels increasing cancer prevalence that begin occur in the third and fourth decades.

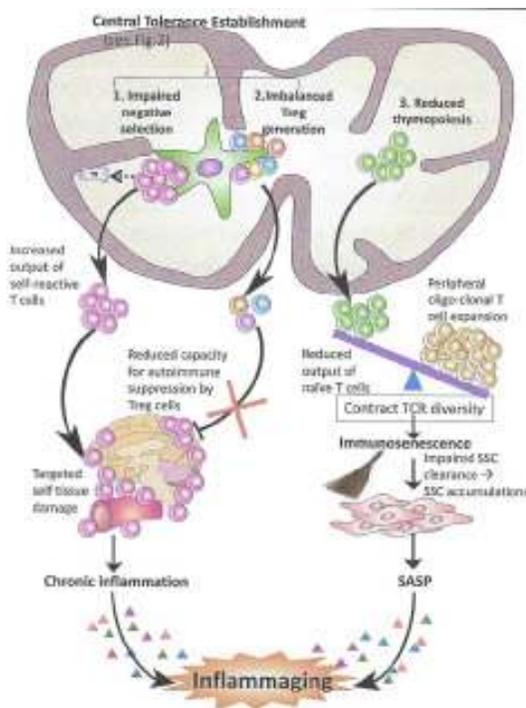


Many things can be done to both slow the onset and to treat inflammaging and immune-senescence. These processes are related to several factors including lifestyle, chronic infectious burden and involution of the thymus. The first two factors likely impact the third.

The lifestyle factors are fairly well known and straight forward. For example, white adipose tissue which concentrates on the abdominal and hip areas is pro-inflammatory.<sup>(1)</sup> It is associated with greater risk of almost all disorders of which inflammation is a feature such as arthritic disease, heart disease and diabetes.

Involution of the thymus is a somewhat manageable contributor to inflammaging and immune-senescence. The thymus has several functions in immune health and regulation. The auto-reactive T cells mentioned above are generally eliminated by the thymus preventing chronic inflammatory activation against DAMPs or self-tissue. This process is termed negative selection. The thymus is also the place where new T cells that

Continued on page 5

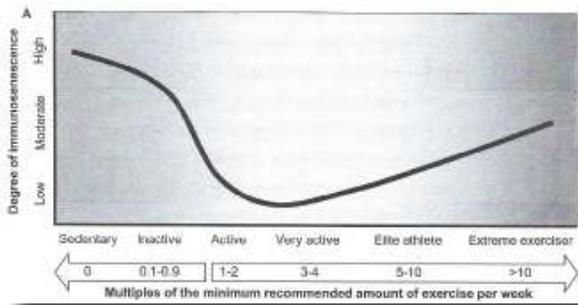


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fight infections, Tregs or T regulatory cells are primed allowing them to be further trained to specific antigens in regional lymph nodes. At the same time the thymus helps to eliminate the old, poorly functioning (immunosenescent) T cells. These cells are also thought to be a source of chronic inflammatory generation. If these two steps diminish, we progressively lose the ability to respond to new infections and can cause progressive inflammatory generation.

Typically, the thymus peaks in volume and function at age 10 and decreases about 3% yearly until about age 30. From that point on it further diminishes about 1% each year until death. This can be accelerated by poor lifestyle. Exercise is a good example. Both lack of exercise and excessive exercise are both associated with greater rates of thymic volume loss.

Both the very sedentary and the extreme exercisers have similar thymic volume and function loss. The most common patient is the non-exerciser, but we do see patients who excessive exercise either with volume or intensity.

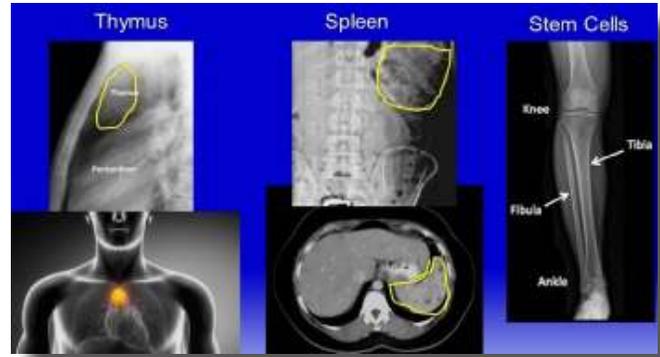


Most using low level or “cold” laser have appreciated its application in the down-regulation inflammation in musculoskeletal tissues though to be the source of symptoms. While this has great therapeutic benefit in some patients, it results in a less complete outcome in others. Appreciating the systemic, non-local contributors to inflammation and targeting those areas additionally with laser may be very beneficial. The patient with inflammaging and immune-senescence is the ideal candidate for this approach. Therapeutically, both inflammaging and immune-senescence can be helped by targeting thymic involution. Removing the stressors on immune dysfunction driven by lifestyle issues should be managed in each patient. Thymic function can also be enhanced with targeted therapy. Some interesting research is being done with laser therapy to the thymus. The major thymic trophic factor that regulates its function is thymosin alpha 1. It has been shown both in an animal model and a human thymic epithelial cells that low level laser increases thymosin alpha 1 production.<sup>(2)</sup> Thymosin alpha 1 recently was shown to mitigate the cytokine storm in SARs-CoV 19 infections that results in the severe lung damage from inflammation.<sup>(3)</sup> A recent expert discussion of the use of photobiomodulation (infrared light including laser) to restore thymic function discusses this potential in immune aging.<sup>(4)</sup>

Two other areas of age-related loss of function co-exist with and magnify the inflammaging and immune-senescence associated with thymic involution. They include reduced splenic shifting of macrophage transition from the pro-inflammatory M1 phase to the anti-inflammatory M2 phase and reduced mesenchymal stem cell (MSCs) production in bone marrow. MSCs supply the thymus with a source of new T regs to maintain immune function.

There is extensive research supporting transcutaneous vagus nerve stimulation to elicit the splenic cholinergic anti-inflammatory pathway with laser can enhance this activity.<sup>(5)</sup> Laser therapy of bone has also show positive effects on MSC production.<sup>(6)</sup>

An enhanced program for inflammaging and immune-senescence ideally should include lasering the painful local areas of inflammation and the related neurologic structures but also systemic immune



support targeting the thymus, spleen and bone. This process is a much broader one that just the local activity at the site of chronic pain and a broader treatment approach can augment outcome. Between 1985 and 2020 the 45-46 year old age group increased 75% and was the single largest demographic shift in our population. The average patient population is older than it was only 3-4 decades ago. Naturally, the typical patient has progressed further into the cycle of more degenerative tissue triggering greater inflammation which impairs tissue healing. This process is highly associated dysfunction of the immune regulating tissues systemically such as thymic aging and techniques such as low level laser therapy can slow this process and the associated disease risks.

- 1) Ramos et al. *Is Obesity an inflammatory disease? Surgery*, 2003;134:329-335.
- 2) Pershin et al. *THE INFLUENCE OF PULSED INFRARED LASER RADIATION ON THE HORMONE PRODUCTION IN THE THYMUS (AN EXPERIMENTAL STUDY)*. *Vopr Kurortol Fizioter Lech Fiz Kult*, Jul-Aug 2011;(4):39-42.
- 3) Matteucci et al. *THYMOSIN ALPHA 1 MITIGATES CYTOKINE STORM IN BLOOD CELLS FROM CORONAVIRUS DISEASE 2019 PATIENTS*. *Open Forum Infect Dis*, 2021;8(1):588.
- 4) Odnokov D, Hamblin MR. *AGING OF LYMPHOID ORGANS: CAN PHOTOBIO-MODULATION REVERSE AGE-ASSOCIATED THYMIC INVOLUTION VIA STIMULATION OF EXTRAPINEAL*
- 5) Albir AA. *ACTIVATION OF THE IMMUNE RESPONSE OF THE SPLEEN BY USING LOW LEVEL LASER (LLL) FOR TREATMENT OF MICE INOCULATED WITH MAMMARY GLAND CARCINOMA*. *Iraqi Journal of Cancer and Medical Genetics*, 2013;6:2 - 2013
- 6) Mirza et al. *THE EFFECT OF 805 NM NEAR-INFRARED PHOTOBIO-MODULATION ON PROLIFERATION AND DIFFERENTIATION OF BONE MARROW STEM CELLS IN MURINE RATS*. *European Review for Medical and Pharmacological Sciences* 2021; 25: 6319-6325.



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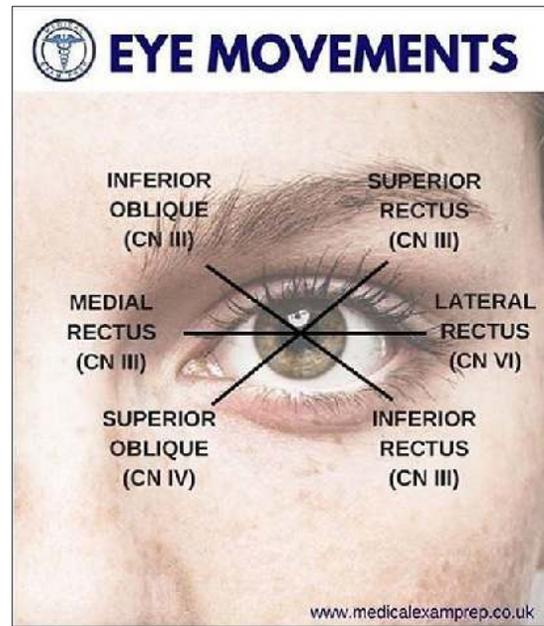
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# Eye Muscle Weakness

By James A. Munse, DC, DACNB, MPA

This article will explore a common form of eye muscle weakness known as “strabismus,” which affects approximately 5 percent of the population. A strabismus occurs when eye muscle weakness leads to ocular misalignment (the deviation of one eye in comparison to the other...or a “lazy eye”). Eye muscle weaknesses often create postural distortions as a compensatory mechanism, and these patients will surely enter your office. And it should be noted that the severity of eye muscle weakness could vary significantly from one patient to the next – based upon the exact cause of their strabismus. This article will further define strabismus, highlight its clinical relevancy, and discuss how to recognize strabismus and identify the specific eye muscle and cranial nerve (CN) involved.

Common symptoms of strabismus include diplopia (double-vision), eyestrain, and impaired depth perception. It should also be noted that some individuals have no symptoms at all – due to mild severity of the misalignment and visual compensation mechanisms. There are 4 strabismus classifications: a) “paretic strabismus,” which is due to paralysis of one or several extraocular eye muscles; b) “non-paretic strabismus,” which is not due to paralysis of extraocular eye muscles; c) “comitant strabismus” is a deviation that is the same magnitude regardless of gaze position; d) “non-comitant strabismus” has a magnitude that varies as the patient shifts their gaze up, down, or to the sides. We often lump these classifications together...For instance, a paretic strabismus is usually non-comitant because the eye muscle has some degree of paralysis and thus the eye cannot fully move in a specific direction. And a non-paretic strabismus is usually comitant because none of the eye muscles are paralyzed – yet there is eye muscle weakness resulting in ocular misalignment due to poor neuronal integration. Strabismus is particularly important to identify in the pediatric



population because if eye muscle weakness is not corrected...it will often lead to amblyopia, which is the inability to see clearly in one eye. This is because persistent strabismus causes the brain to ignore visual input from the poorly aligned eye, which consequently leads to poor visual acuity due to lack of input and activity in the visual cortex. As such, visual input from the deviated eye is suppressed, and this suppression overtime dampens the visual development of that eye. Consequently, individuals with strabismus often experience lifelong impairment of the visual system along with ocular misalignment and a loss of depth perception. However, there is good news – strabismus can be successfully treated if identified in young children. As such, it is vital to make sure that all children entering your office are evaluated for strabismus – especially those under 5. This is because the visual system develops during the first 5 years of life.

Strabismus is treated by placing an eye patch on the dominant eye, which forces the brain to integrate visual input from the weaker eye (and thus further develop the visual cortex for that eye). Specific eye muscle therapies (exercises) can also be completed – but the eye patch should be utilized first (and is very effective). Children almost always fully recover when strabismus is identified and treated before the age of 5. However, they may always have difficulty with depth perception. If strabismus is found in children after the age of 10, then their vision is likely to only recover partially. And unfortunately, adults with untreated strabismus since childhood will always maintain their presentation because their visual pathways have fully developed and solidified.

It is also important to identify the specific eye muscle that is weakened and/or the cranial nerve that is involved, which can provide a location for the injury site and guide treatment recommendations. Sometimes the eye muscle itself is weak, and other times the cranial nerve that controls the muscle is damaged. Eye movement is controlled by six extraocular eye muscles (each of which are comprised of skeletal muscle tissue). These muscles include the superior rectus, inferior rectus, medial rectus, lateral rectus, superior oblique, and inferior oblique. These muscles are controlled by CN III (superior rectus, inferior rectus, medial rectus, and inferior oblique), CN IV (superior *Continued on page 7*

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*Continued from page 6* oblique), and CN VI (abducens). Consequently, CN III innervates 4 of the 6 extraocular eye muscles for each eye. Here are the brief actions for each eye muscle: medial rectus = turns the eye medially; lateral rectus = turns the eye laterally; superior rectus = elevates the eye and turns it laterally; inferior rectus = depresses the eye and turns it laterally; superior oblique = depresses the eye and turns it medially; inferior oblique = elevates the eye and turns it medially.

Due to the 4 muscles CN III innervates – its impairment will often cause the eyes to deviate down and out. This is because CN IV and CN VI innervate muscles that pull the eye laterally and downward – and these muscles are now unopposed with a CN III palsy. Also, it is possible that the pupil size will increase because CN III contains parasympathetic fibers that cause pupillary constriction. CN IV impairment will result in a head tilt away from the affected eye as well as a common complaint of double vision when reading (they have a challenging time looking down and converging their eyes – which requires CN IV to activate the superior oblique muscle). CN VI impairment will result in a head rotation to the affected side because this patient will have weakness of the lateral rectus muscle (and thus struggle with turning the involved eye laterally).

Differentiating between “chronic” and “acute” cases of strabismus and the progression of diplopia is also critical. Causes of acute episodes of double vision and eye muscle weakness include stroke, increased intracranial pressure, infection, and trauma. As such, acute scenarios often call for immediate advanced diagnostic imaging to rule-out life-threatening scenarios. Outside of children and an acute onset of strabismus or double vision – most clinical findings of strabismus are benign and clinically insignificant. Most non-paretic (no muscle paralysis) and comitant (deviation that is the same magnitude regardless of gaze position) is secondary to undiagnosed childhood strabismus. And once again - no current clinical application that can make a meaningful difference.

Sometimes strabismus occurs along with symptoms such as brain fatigue/fog after reading or driving, excessive eyestrain, and recent headaches. Assuming red flags are not present – this form of strabismus is often due to imbalances in the vestibular system, cerebellum, and/or poor neural integration in the brainstem. Because this pattern of strabismus involves dysfunctional

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neural integration between various areas of the brain – it often responds well to brain exercises that enhance the activity and communication within these regions. Consequently, immediate and significant clinical change is often realized with the implementation of specific exercises to address the neuronal pathways that have been aberrant. This form of strabismus can occur due a variety of reasons, but commonly it is seen after a traumatic brain injury (TBI) or with a metabolic syndrome that creates excessive inflammation in the brain.

So how do you perform an eye exam, identify, and consequently treat a strabismus? Well...as a reminder – first make sure that the strabismus is not acute and there are no red flags that warrant advanced imaging. The next step is observation. You may notice obvious findings – like an eye that is clearly misaligned and deviated laterally and downwards (which represents a CN III palsy). You may also notice a large pupil on the same deviated eye (further evidence to support a CN III lesion). Or you may notice that the patient has a head tilt, which could represent a CN IV palsy. Or the patient may have excessive head rotation when looking to a particular side, which could represent a CN VI palsy. The patient's history and explanation of their symptoms may also provide a clue as to which cranial nerve or eye muscle is weak. For example, if the patient complains of difficulty looking downward and has blurred vision while reading – then it's likely a CN IV issue and involves the superior oblique muscle.

Once general observation and the Continued on page 9



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Continued from page 7 consultation has been conducted...it's time to take a closer look. Let's assume that the patient has strabismus with some double vision – but their strabismus is not acute and is lacking red flags. You should first perform the corneal light reflex, in which you shine a light onto the patient's eyes from about 2 feet away (you do not want their eyes to converge). The patient is asked to look at the light while you observe the reflection of the light in their pupils, which should be visible slightly medial and inferior to the center of the pupil. This will allow you to see asymmetries in eye position that you may have not noticed during the general observation. Note changes or deviations in eye position if you see it. The corneal light reflex is critical for identifying subtle strabismus, particularly in children.

Next – check the six cardinal directions of gaze by making a wide “H pattern” in the air with your thumb (still standing about 2 feet away from the patient). The patient should follow your thumb with their eyes and their movements should be smooth, symmetrical, and conjugate. Once the H-pattern is completed – test for convergence and observe their eyes as you move your finger closer to the tip of their nose (their eyes should converge). It should be noted that the patient's head should be oriented straight for these procedures (remove any rotation or head tilt that may be present). There is quite a range of eye muscle weaknesses – and depending upon the severity of weakness...you may have noticed that one eye struggled to move in a specific direction. Once this is evident, ask the patient if they experience blurred vision when following the target in that same direction. If they experience diplopia when attempting to move their eyes in the direction of difficulty, then that confirms the specific eye muscle and cranial nerve involved. To put it another way – perform the H-pattern and ask the patient to tell you if they experience blurry vision at any point...if they say yes – note the direction and position of the eyes when this occurs and further check for smooth, conjugate eye movement in that direction.

You will be able to identify the specific eye muscle and cranial nerve involved based upon the position and direction of eye movement when diplopia occurs. For example, if the patient experienced blurred vision when looking to the left and you notice that their left eye does not fully turn to the left...then the eye muscle involved is the left lateral rectus and it is innervated by CN VI. Here's another example – the patient experienced blurred vision when looking to the left and downwards. Upon examining the eyes – you notice that the right eye does not fully move downwards and medially. You also remember that the patient had a left head tilt upon entering your office and complained of blurred vision when reading. All these findings point to the superior oblique muscle, which is innervated by CN IV. As a review – please refer to the earlier section in which the actions and innervation for each eye muscle was listed.

The previous patient examples involved those with moderate-severe strabismus, all of which likely had some degree of eye muscle paralysis. However, strabismus can often be quite subtle and challenging to find. As such, the following examples will include mild forms of strabismus that are non-paretic and comitant... these can be young children or adults that had strabismus as a child and was never treated. Here is an example: your initial visual observations appear normal. This is followed by the corneal light reflex and the H-pattern of eye movement – everything looks good, and no symptoms of blurred vision was noted. Now – you should perform the “cover-uncover” test. Ask the patient to focus straight ahead while you cover their right eye with your hand or notecard, etc. Observe the left, uncovered eye...then, uncover the right eye and observe what happens to the position of the left eye. Does it move? In this example, the left eye turned slightly to the left upon uncovering the right eye. Now, cover the right eye again and observe what happens to the left eye...the left eye now turned slightly to the right. As such, the left eye has to turn to the right (turn medially)



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when it is the only eye receiving visual input; thus, it has to correct itself by turning medially when it is the only eye comprehending the visual scene. And when both eyes are open – the left eye is mildly deviated laterally. We repeat the same procedure with the right eye – and there is no movement whatsoever when the left eye is covered or uncovered...it remains fixed. Consequently, there is a strabismus of the left eye due to weakness in the left medial rectus muscle. We would not have identified this subtle finding if it was not for the cover-uncover test. For most adults – this finding is not clinically significant because compensation patterns are in-place, and we cannot change the strabismus. But as a reminder – this is critical for children. We can now refer the child to a pediatrician, begin treatment with an eye patch, and obtain significant and lifelong results. I strongly recommend checking all young patients in your office for strabismus. The corneal light reflex followed by the cover-uncover test works very well for children.

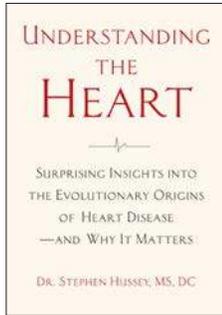
A special thanks to Dr. Brandon Brock, Dr. Datis Kharrazian, and the Functional Neurology Seminars program. Most of the information within this article was derived from their presentations.

**James A. Munse, DC, DACNB, MA of Chantilly Chiropractic Center in Chantilly, Virginia is a Diplomate of the American Chiropractic Neurology Board, which he earned through the Carrick Institute. He is proficient in Full Spine Diversified (Palmer Package), Gonstead, Activator, Thompson, Extremity Adjusting, Flexion-Distraction, and Functional Neurology diagnosis and rehabilitation. In addition to practice, Dr. Munse serves as an adjunct professor at George Mason University. He can be reached at jamunse@gmail.com.**

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New Book by UVCA Member Dr. Stephen Hussey!

Understanding the Heart by Dr. Stephen Hussey, MS, DC is an exploration of the heart and the origins of heart disease. The book opens with an evolutionary explanation of why heart disease happens and how those evolved characteristics fit within the modern world. Stephen then discusses information about the heart that lead us to explanations of heart failure, atherosclerosis, heart attacks, and high blood pressure. Finally, he discusses the major aspects of our lives that we should pay attention to in order to prevent heart disease: maintaining metabolic flexibility, reducing oxidative stress/inflammation, and maintaining balance in the Autonomic Nervous System.



Dr. Hussey is a board-certified chiropractor and functional medicine practitioner. He has a bachelor's degree in health and wellness promotion from the University of North Carolina Asheville as well as a doctorate of chiropractic and master's in human nutrition and functional medicine from the University of Western States. In addition to working as a chiropractor in clinical practice, Dr. Hussey has worked

with people all over the world, coaching them back to health.

For more about Dr. Hussey and his books, along with a link to pre-order this newest publication, visit [www.resourceyourhealth.com](http://www.resourceyourhealth.com).



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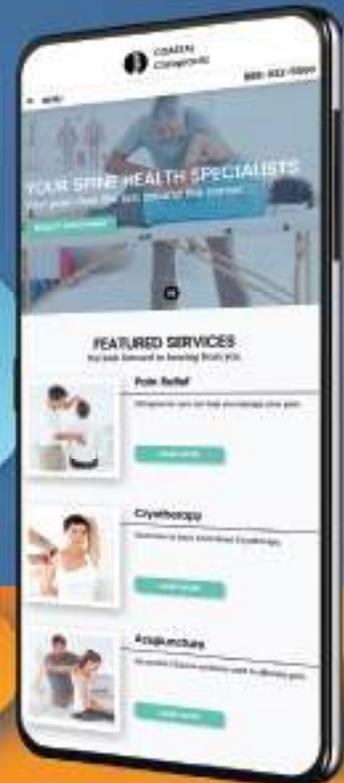
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Phone: 703-368-8800  
dr.kyle.bloch@gmail.com  
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neemishamaster@gmail.com  
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Member Type: Student  
**Referred by Dr. Michael Amato**

### **Haley, DC, Zach**

Wards Corner Chiropractic  
Norfolk, Virginia  
Phone: 757-588-8908  
zachwhaley1@gmail.com  
Member Type: First Year DC  
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Extremity Adjusting; Full Spine;  
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Phone: 252-537-2425  
Member Type: Out of State DC

### **Phillips, Teresa**

Irving, Texas  
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Applied Kinesiology; Cranial Sacral;  
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dr.placide@hopechirova.com  
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*Continued from page 1*

- Conducting Internal Self-Audits to Reduce the Risk of External Audits by Insurance Companies
- Chiropractic Musculoskeletal Injury Prevention Program
- Direct Primary Care – An Emerging Trend
- Getting Reimbursed for Personal Injury Claims Using Assignments of Benefits and Medical Liens
- Negotiating Provider Contracts
- Medicare Reviews, Audits, and Investigations
- Reducing the Financial Risk of Post Payment Audits Conducted by Health Insurance Companies
- Benefits and Challenges of Population Health Management
- Confronting Insurance Companies Who Don't Honor Assignments of Benefits (AOBs)
- Assignment of Benefits VS. ERISA Health Insurance Lien
- Establishing an Effective Debt Collection Process
- Working with Patients to Resolve Insurance Issues
- Understanding Your Electronic Fund Transfer (EFT) Options
- Health Savings Account – An Alternative way to Provide Health Care Benefits to Employees
- Provider's Rights and Insurance Company's Legal Obligation to Pay Clean Claims under Virginia Law

- Testifying as a Witness in Court Cases
- Subpoenas for Medical Records—Complying with HIPAA Regulations and State Law
- What You Should Know About Workers' Compensation
- When Patients Declare Bankruptcy
- Using the Claims File to Discover Bad Faith Conduct by Insurance Companies
- Medical Fraud from an Insurance Company's Perspective -- How to Avoid an Investigation
- Insurance Claims – How They Are Examined, Processed and Settled
- Appealing Denied Claims on ERISA Regulated Insurance Plans
- Refund Request for Overpayment
- Establishing Medical Necessity
- Silent PPOs

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We've got you covered, too! You'll find helpful information and colleagues you can consult with under Tools & Resources > Cash Practices. If you have specific questions or suggestions related to cash practices, please forward them to [jconnolly@virginiachiropractic.org](mailto:jconnolly@virginiachiropractic.org).

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The programs listed above are merely the NEWEST offerings to UVCA members. Other valuable member affinity programs include:

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## Having the Right Insurance for Your Chiropractic Office

Operating a chiropractic office is a delicate business in every sense. The care and caution shown in treating patients must extend to protecting the practice by having the right policies in place. Otherwise, you're leaving yourself open to legal action on multiple potential grounds ranging from patient injury to poor documentation. Let's review some of the most valuable insurance options every office should budget for.

### Malpractice Insurance

This is an absolute must for every chiropractic office regardless of the practitioner's level of experience. Malpractice claims can run into the hundreds of thousands of dollars, so chiropractors need to know their chosen insurance provider has the resources to help them cover a potential claim. Researching an insurer is essential while shopping around and before committing.

### Business Interruption Insurance

Chiropractic offices can be put on hold through a variety of events such as natural disasters, bad weather, or a pandemic. Business interruption coverage can help offices recoup lost income during the downtime caused by a covered event. It can also help with a temporary or permanent move to new operating facilities.

### General Liability Insurance

These policies can protect your office on multiple fronts by helping to cover expenses related to:

- Injuries sustained by visitors while on your premises.
- Slander or libel accusations.
- Personal and advertising injury.
- Property damage.
- Legal defense costs.

Some offices opt for a **Business Owners Policy (BOP)** which can deliver the perks of general liability coverage plus the benefits of both property and business interruption insurance. Speak to a licensed policy provider to review the best options for your office.

### Cyber Insurance

Your office's digital infrastructure is as vulnerable to damage as the physical ones and the fallout of compromised patients, reputation, and revenue is just as likely. Cybercriminals are on the rampage with phishing attacks, ransomware, info. stealers, and more, creating an online threat landscape that's expanding rapidly and could devastate your records and finances.

Cyber insurance provides important coverage that is simply essential in today's business world, helping to shield you against the effects of:

- Privacy invasion.
- Data and record loss.
- Compromised PII.
- Litigation.
- Software and/or hardware repairs.

Some general liability or BOPs may have an element of cyber insurance written in, but it's recommended you get a dedicated policy that can provide first- and third-party coverage.

The first-party aspect helps take care of business liability costs incurred through a cyber event. The third-party aspect looks after anyone outside the business who was negatively impacted, such as a client or another business. Cyber insurance is still a developing field so it's important to scrutinize your policy to see what you're covered against (and for how much) and what you're still vulnerable to.

### Audit Insurance

When I started out in practice, the biggest risk I faced was a potential malpractice suit. Thirty-five years later, the biggest threat to my practice is an audit. Often, audits are triggered by patients who are not unhappy with your clinical care, but you're billing or collection practices. Audit insurance policies can pay for the defense costs, civil fines, and penalties, arising from allegations of improper billing, HIPAA, EMTALA, and STARK violations. It is important to check that any coverage you purchase includes both governmental and commercial payers, qui tam plaintiffs, and voluntary self-disclosure. It is not a bad idea to ask your carrier if additional coverage for legal expenses for disciplinary proceedings by a state licensing board can also be added. If you're not sure where to get this type of coverage, reaching out to your malpractice carrier is a great place to start.



*Dr. Ray Foxworth is a certified Medical Compliance Specialist and President of ChiroHealthUSA. A practicing Chiropractor, he remains "in the trenches" facing challenges with billing, coding, documentation and compliance. He has served as president of the Mississippi Chiropractic Association, former Staff Chiropractor at the G.V. Sonny Montgomery VA Medical Center and is a Fellow of the International College of Chiropractic. You can contact Dr. Foxworth at 1-888-719-9990, info@chirohealthusa.com or visit the ChiroHealthUSA website at www.chirohealthusa.com.*

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## Can CBGA/CBDA Prevent Covid?

Joe Kryszak, MBA

There is no more important health news since the beginning of the Covid Pandemic than the new research out of the Oregon State University, led by Dr. Richard van Breemen. This groundbreaking study concludes specific compounds in Hemp (*Cannabis sativa* L., Cannabaceae) can prevent human infection from the virus that causes Covid-19. On Monday, January 10<sup>th</sup>, 2022, a report on the research, "Cannabinoids Block Cellular Entry of SARS-CoV-2 and the Emerging Variants," was published online by the Journal of Natural Products.

Dr. van Breemen's study concluded that specific cannabinoid compounds found in hemp - CBGA (cannabigerolic acid) and CBDA (cannabidiolic acid) - bind to the spike protein of SARS-CoV-2, which effectively prevents the spike protein from binding with angiotensin-converting enzyme-2 (ACE-2) receptors. The spike protein works by "hooking" onto the ACE 2 receptors organs linings, including lung linings, which is how the virus infects people. With CBGA/CBDA binding to the virus spike, the virus cannot enter the cell by binding as it can never "hook" to the cell.

Just as importantly, the research indicated the hemp compounds were equally effective against variants of SARS-CoV-2, including variant B.1.1.7, which was first detected in the United Kingdom, and variant B.1.351, first seen in South Africa.

"These variants are well known for evading antibodies against

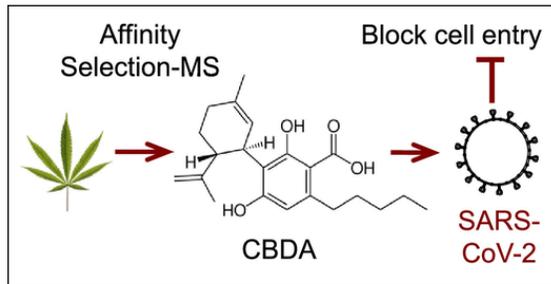
early lineage SARS-CoV-2, which is obviously concerning given that current vaccination strategies rely on the early lineage spike protein as an antigen," said van Breemen. "Our data show CBDA and CBGA are effective against the two variants we looked at, and we hope that trend will extend to other existing and future variants."

"That means cell entry inhibitors, like the acids from hemp, could be used to prevent SARS-CoV-2 infection and also to shorten infections by preventing virus particles from infecting human cells," said Richard Van Breemen, a researcher with Oregon State's Global Hemp Innovation Center, College of Pharmacy and Linus Pauling Institute in the Oregon State University release.

CBGA and CBDA are two of 115+ cannabinoid compounds found in the Hemp plant. They are not as well-known as CBD, or its even more famous cousin, THC. The "A" in CBGA and CBDA stands for acid. CBDA and CBGA are precursors to CBG and CBD. In fact, CBGA is the precursor to all cannabinoids in the hemp plant and is sometimes referred to as the Mother of all Cannabinoids.

The excellent news for Chiropractors is that CBGA/CBDA are not controlled substances like THC, the psychoactive ingredient in marijuana. The report mentioned that both CBDA/CBGA have a good safety profile in humans, and they have the potential to prevent and treat infection by SARS-CoV-2.

*Continued on page 18*



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- Homestead Spa and Spa Garden, tennis, golf, horseback riding, hiking, fishing, mountain biking, dancing, restaurants/pubs for all tastes and budgets, more!



Continued from page 16

This news offers hope to people across the globe who have had their lives dramatically changed by the Covid virus. This is also great news to Chiropractors and other health providers who have long worked to bring healthy, natural products to their patients. While Stirling is sure some companies are working on patents on the claims outlined in the study, we are also confident that there will be quality CBGA/CBGA products in the market.

I have had many conversations with Hemp farmers, extractors, and fellow producers of cannabinoids products about the implications of this study as it specifically calls out Industrial Hemp - Cannabis sativa L., Cannabaceae. The Industrial Hemp plant was legalized for production under the 2018 U.S. Farm Bill, with one of the important stipulations being that it must contain less than 0.3% Delta 9 THC by weight. THC is the compound in Cannabis associated with getting people "high." By keeping the > 0.3% ruling, most products from CBD companies will not get people high. The >0.3% ruling also is used to protect individual states' legalization of Marijuana, of which many have become reliant on the tax income from the legalization.

Stirling Professional predicts significant changes to the current CBD/Cannabinoid industry with great news.

1. There will be a race to produce potent CBGA/CBDA compounds - Stirling was unable to find a specific CBGA/CBDA product in the market after a detailed review of the major CBD companies conducted 1/13/22. When available, if you consider incorporating CBGA/CBDA into your practice, the most important consideration is ensuring that the company you are buying from is reputable and provides 3rd party testing with all its products. Stirling Professional CBD predicts that products could be on the market by as soon as a couple of weeks.
2. Minor Cannabinoids will gain more traction – CBD, THC, and

now CBGA and CBDA are the most known cannabinoids found in the hemp plant. Still, there is a lot of research on other cannabinoids which will completely revolutionize the traditional "CBD" market. CBC and CBG are two cannabinoids getting a lot of research dollars, and Stirling expects more positive news about the health benefits of these and other cannabinoids.

3. The FDA and FTC will come down on companies and providers making Health Claims – The researchers and companies paying for the research expect to make their money back. They are most likely filing patents protecting their right to make the medical claims they researched. Please be careful not to make any medical claim or buy products from companies that claim any cannabinoid can prevent or cure any disease. The FTC and FDA have imposed fines of over \$100k against companies making claims that CBD products can cure or prevent diseases – and the penalties have been exceptionally high against companies that try to target "Vulnerable Targets" – such as the chronically ill, elderly, and life-threatening diseases.

In summary, the study from Oregon State University is incredibly promising. The research has been picked up in Forbes, WSJ, Fox News, and many others. In the case of Forbes and WSJ, the article referring to the study was the #1 read story on that platform.

Stirling Professional believes that this research is the tip of the iceberg. Undoubtedly, future research will continue to show cannabinoid compounds can help resolve many of the issues facing this country's health care system. This nation has been facing a health crisis for the last couple of decades. With the leadership of the Chiropractic community, we might see the light at the end of the tunnel – that is, if the government allows us to.

Joe Kryszak is the President of Stirling Oils. He holds a Masters Degree in Business Administration and Continued on page 19



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is a former 20+ year Fortune 500 Leader, leading strategic growth teams and initiatives at HP, Lenovo and Amazon. He grew U.S. business for a Fortune 100 company from \$70m to over \$1B in six years. Stirling Professional was built by and for Chiropractors and professional offices and gives back regularly to the profession. A UVCA Supporting Supplier Member, Exhibitor, and Sponsor, Stirling Professional brings top

quality CBD+ products to your patients with the industry-leading lineup of 2500mg CBD Lotions, THC and THC Free Capsules and Gels, and four great solutions for better sleep. Joe and the company are committed to running an efficient organization and bringing affordable solutions to your patients. Joe can be reached at Pro@stirlingoils.com. To learn more about the company and its products, visit <https://stirlingprofessional.com/>.

## UVCA Classifieds

1/31/2022

UVCA DC Members may place a classified ad in *The Virginia Voice* & on VCA's website free of charge. Fee is \$50 for member vendors & \$88 for all non-members. Listing will remain on website for 3 months + appear in at least 1 issue of VCA's newsletter & e-blast to DCs throughout VA. For more information, e-mail Elaine at [admin@virginiachiropractic.org](mailto:admin@virginiachiropractic.org).

### Coverage Needed

Part Time/Coverage Chiropractor in DC. We are searching for a competent, energetic, clinically minded DC to join our team in Washington, DC. Excellent communication, clinical, and adjusting skills as well as an innate interest in people will be rewarded. \$55+ per hour. Per Diem/Full time options available. Full time position has robust salary and benefits. Send CVs and any questions to [contactus@vachiros.com](mailto:contactus@vachiros.com). [listing#030122b]

### Coverage

Experienced Chiropractic/acupuncture vacation relief coverage. Richmond to Hampton Roads and surrounding areas. Contact Steve Giltz (757) 717.0074. [listing#021822a]

VACATION RELIEF SVCS: Keep your office open. Your practice run your way. 28 years experienced office coverage. Proficient in many

techniques. NCMIC insd. Statewide. Refs. Reasonable rates. Call J Terry Fowler, DC at 770-597-2872 (cell), or email [jtfowlerdc@yahoo.com](mailto:jtfowlerdc@yahoo.com).

Is peace of mind, keeping your office open & continuity of care important? Yes. I am Dr Pat Boulogne. I have over 30 yrs of experience & am versed in the majority of techniques. NCMIC insured. References available upon request. Let's talk to see if we are a fit.... Email [drpatb@gmail.com](mailto:drpatb@gmail.com) or call 202-642-2335.

### Position Wanted

Experienced Chiropractor/Acupuncturist with Va. license relocating to Richmond from Va. Beach and seeking a permanent position. For more info, contact Dr. Steve Giltz, (757) 717.0074. [listing#031022a]

### DC Position Available

Charlottesville, VA: Award-winning office of 40 years with two doctors is seeking a third doctor to join our team and be immediately successful. Industry-leading salary with bonus, as well as health insurance and excellent 401k package. Diversified, Cox, and/or Thompson techniques preferred. Please email resume to [drfusco@coxclinic.com](mailto:drfusco@coxclinic.com). [listing#050222b]

Fredericksburg: Join our team and achieve personal and practice success. Training provided at our family wellness practice w/2 locations.

## Beware of Classifieds Scams



Classified advertisers are occasionally contacted by purported buyers that turn out to be bogus/suspicious. We suggest the following.

- **Be alert to the fact that scams exist.** When dealing with uninvited contacts from people or businesses, whether it's over the phone, by mail, email, in person or on a social networking site, always consider the possibility that the approach may be a scam. Remember, if it looks too good to be true, it probably is.
- **Know who you're dealing with.** If you've only ever met someone online or are unsure of the legitimacy of a business, take some time to do a bit more research. Do a Google image search on photos or search the internet for others who may have had dealings with them. If a message or email comes from a friend and it seems unusual or out of character for them, contact your friend directly to check that it was really them that sent it.
- **Do not open suspicious texts, pop-up windows or click on links or attachments in emails** – delete them: If unsure, verify the identity of the contact through an independent source such as a phone book or online search. Don't use the contact details provided in the message sent to you.
- **Look for common warning signs** that someone may be trying to scam you:
  - The buyer can't meet in person.
  - The buyer requested you send the item to his/her "shipping agent."
  - The buyer offered you more money than you were asking.
  - The buyer asked you to send money through Western Union or MoneyGram to the "shipping agent."
  - The buyer only sends you text messages and won't speak to you on the phone.

Competitive base pay w/unlimited bonus system. Malpractice, vacation, 401k, UVCA membership. Email resume: [drchris.wfc@gmail.com](mailto:drchris.wfc@gmail.com). [listing#050222a]

If you are dedicated and passionate about service to patients and lifelong learning, then this opportunity is for you. We are looking for a Virginia-licensed DC to join our practice – one based in AK, Functional Medicine/ Nutrition and Functional Neurology. The best candidate is one who has a strong desire to learn and assist patients towards their health, utilizing a variety of diagnostic tools, resources and natural solutions. This is an ideal

situation for a new or established doctor. We operate a fully equipped office and have a great location in the Richmond, Virginia area. For further information or to submit your resume please contact: [drsmith@rcn.health](mailto:drsmith@rcn.health). [www.richmondchironeuro.com](http://www.richmondchironeuro.com). [listing#050122c]

Norfolk, VA practice specializing in improving health and wellness, enhancing athletic performance and the prevention, management and rehabilitation of sports related injuries is looking for a full-time associate position to be filled. Reliable, outgoing, and energetic doctor who can engage

*Continued on page 20*

Continued from page 19

and communicate with people is a must. Excellent adjusting skills required with experience in extremity adjusting, knowledge of rehab, and soft tissue techniques a plus. Send CV to drclayton@ghentchiro.com. [listing#050122b]

Virginia Beach. Looking for a full or part time chiropractor for busy office. As a member of our team, you'll have the opportunity to build your practice in the company of established docs from a variety of professional backgrounds, and enjoy the flexibility to use your favored approach and methods. Compensation negotiable. Contact tcvnick@gmail.com. [listing#042822a]

DC Associate, licensed in Virginia, with experience and/or desire to treat patients utilizing evidence-based practice. Experience with diversified manipulation, therapeutic exercise progressions, and interest in joining a multi-disciplinary practice working with other types of providers. We work as a team and have a lot of fun, but we take patient care seriously at the same time. Knowledge of athletic training and rehab or sports injury management is a plus. Strong diagnostic skills and ability to progress a patient through active care are required. [listing#042022a]

Chiropractor for integrative practice in Arlington. PT or Possible FT. Ideal candidate will be natural leader, excellent adjuster, thrives in team environment, empathetic, willing to learn, confident in clinical skills, excellent communication skills & ultimately does what's necessary to get the job done. Must be eligible for immediate licensure in VA. Competitive salary w/bonus & potential for practice equity, health insurance. www.advhealthctr.com/please email Drlou@advhealthctr.com, (703)521-0644. [listing#041722b]

Virginia Beach. Established 30+ year family oriented chiropractic practice looking for an excellent doctor to add to our growing team. Diversified practice with therapies and laser. Great salary, performance based bonus, paid vacations, 4 day week. Position available immediately. Send resume to Lookingforadc@gmail.com. [listing#041722a]

Ashburn, VA Associate Wanted. Join a multi-disciplinary team of Chiro's/PT's/

Acupuncturists/Reiki and treat patients utilizing evidence-based practices. Experience w/diversified manipulation/therapeutic exercise/ART/IASTM/Dry Needling a plus. Contact admin@mybwdoc.com w/CV. Excellent salary, commission & benefits package. [listing#4/13/22a]

Tremendous opportunity in Hampton Roads! Lemmata Chiropractic is looking for only the best chiropractors to join our team of doctors. We are a family, wellness-based office with a dream of expanding to all parts of Hampton Roads to better serve our community. This is a full-time salaried position with benefits. Please send your resume to demartinez@lemmatachiro.com. [listing#041222a]

Koff Chiropractic in Manassas, VA is looking for a part time Chiropractor to work at our busy office. The days are flexible. We are seeking a motivated chiropractor who loves people and chiropractic as much as we do. Our office is one of the longest established offices in Northern VA. If interested email us at koffchiro@aol.com. [listing#040822a]

We have raised up multiple associates, in the Virginia Beach area, over the last 15 yrs in a well laid out clear cut model that has created doctors in hugely successful practices. If you are hardworking, dependable, & teachable then this position may be for you. Income includes base pay, commission, bonuses, education & more. Send your resume to askdrbobdc@aol.com or call 757-431-2225. [listing#040722a]

Leesburg, VA. Full- or Part-Time DC needed in our well-established practice. Busy practice in Downtown Leesburg looking for a positive, skilled and passionate Doctor to join our team! We are a well established practice that is in need of another Doctor to keep up with demand. Excellent adjusting, communication and people skills are needed for the position! Health Insurance, Malpractice, UVCA Membership and Continuing Education provided. Please contact us at cleggchiro@gmail.com or call Dr. Brad directly at (703)727-2472. [listing#040622a]

Looking for a DC to join our team. Located in No.VA/Falls Church. Diversified practice servicing athletes, families, auto injury patients & anyone with a spine. Full time position starting



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with a base salary & an attainable bonus structure. Owner is looking to scale back from patient care after 30 yrs & hoping to find the right person to buy in/buy out over the next couple of yrs. Health insurance benefits including dental & vision, Health Savings account, malpractice & continuing education part of the compensation package. Must be team player, able to maintain their patient schedule & new patient marketing. Spanish speaking a plus. Solid practice in VA for 25 yrs. You will learn documentation, Compliance programs, business principles & patient case management. Please email resume to drdamato@qualitychirova.com. [listing#032222a]

Lynchburg, VA. Full Time Associate Wanted: Well established practice of over 40 years looking for a motivated DC. Great patient flow and system to allow easy patient care into Wellness. Techniques include Diversified, Thompson, Activator, and Gonstead. Great opportunity to treat many types of cases. Contact drarthur@lynchburgchiropractic.com or 434-384-1631. [listing#031522a]

Full Time DC Associate, Leesburg. Looking for a ROCKSTAR chiropractor

who is passionate & motivated about serving our patients, & community. We are a 100% cash practice consisting of full spine manual adjusting, spinal decompression, functional rehab, & multiple soft tissue therapies. Base Salary + Bonus \$65k-\$100k per yr. Paid malpractice, paid continuing education, paid business development courses. Must be licensed or soon to be licensed in Virginia. Send your resume to info@integrativechiropractic.net or call Dr Brassfield (owner) directly at 602-300-2523. [listing#030822a]

Richmond, Ariya Family Chiropractic Centers: Awesome team, great office support, experienced & caring management. \$60k starting salary plus bonus structure in high-volume practice. 401k, first year malpractice, UVCA membership & conventions, medical insurance, leadership opportunities, training and support provided. Co-founder of 18 years is stepping away from patient care to focus on practice management. For more information call 804-526-7125. Please send resume to mpatel@ariyachiro.com.

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Part Time/Coverage Chiropractor in DC. We are searching for a competent, energetic, clinically minded DC to join our team in Washington, DC. Excellent communication, clinical, and adjusting skills as well as an innate interest in people will be rewarded. \$55+ per hour. Per Diem/Full time options available. Full time position has robust salary and benefits. Send CVs and any questions to [contactus@vachiros.com](mailto:contactus@vachiros.com). [listing#030122b]

Northern Virginia DC Associate Needed ASAP! Well established chiropractic office looking for an energetic, team-orientated doctor to join our office. We will provide mentoring and support to grow. We see patients of all ages and have rehab, digital x-rays, physiotherapies, modern chiro-equipment. Guaranteed base salary of 91,000+, benefits package, malpractice, association membership and so, so much more! Call/text 757-416-4814 or email [dr.wellner@gmail.com](mailto:dr.wellner@gmail.com). [listing#020522a]

Are you a passionate Chiropractor searching for an opportunity to grow financially and provide excellent care in a family/sports/wellness-based practice? Look no further. Relocation reimbursement up to \$2,000. Salary: \$75,000-\$100,000 annually, easily attainable bonuses for earnings greater than \$100,000. Health/Dental/Vision Insurance options. Malpractice Insurance paid, 401k, Vacation/Personal days, and Major holidays paid. Send CV and cover letter to: [doctors@kempsvillechiro.com](mailto:doctors@kempsvillechiro.com). [listing#012822a]

Chiropractic Associate, Gainesville Virginia. Family and Sports chiropractic office. Virginia Licensed or in process. Great work environment, fun and energetic office. Patient focused. Full-time work only 3.5 days per week. M/W/F and sat mornings. Will train additional sports techniques (including mulligan belt, cupping, flossing, instrument assisted myofascial). Competitive wages. Reimbursement stipend for malpractice and continuing education courses. Please email any interest to: [Hollymoriarty@hotmail.com](mailto:Hollymoriarty@hotmail.com) [listing#012722a]

Looking for a compassionate & energetic full time associate for well established fast paced clinic. Diverse practice in one of three clinics in

Continued on page 22

## ECA-IPN Update

As you may know, SecureCare Corporation was the administrator for the East Coast Association Independent Providers Network (ECA-IPN), comprised of the Virginia, Maryland, and Pennsylvania state chiropractic associations and created to positively impact insurance issues in our re-spective states.

While SecureCare has had notable success in several states, including Nebraska, Illinois, Ohio, and Minnesota, it has not had the same success in Virginia, Maryland, and Pennsylvania.

Earlier this year, SecureCare, ECA-IPN representatives, and representatives from other SecureCare participating states met in Arizona for strategic planning. The goal of the meeting was to increase efficiency and maximize opportunities.

As a result of the Arizona meeting, SecureCare developed a new “marketing support agreement” for all participating state associations. The new agreement is similar to a traditional vendor affinity program: each participating state association has the potential to earn revenue by providing marketing support to SecureCare. The agreement is consistent, standardized, and directly between SecureCare and individual state associations, rather than the ECA-IPN.

The ECA-IPN's state association representatives have been meeting since receiving the proposed new agreement in May. It has been vetted by legal counsel and studied to ensure that it meets the following criteria.

1. Maintains a “messenger model” approach for chiropractors through which doctors will have an opportunity to review all contracts and make individual decisions regarding participation.
2. **Protects the higher early investment of IPN “founding doctors.”**
3. Provides a financial incentive to participating state associations that each can use at its discretion.
4. States what each participating state is expected to do to receive such an incentive.
5. Creates a chiropractic “seat at the table” with insurers for important conversations regarding UM/UR and other vital health insurance topics.
6. Provides a 90-day “out clause,” essentially an exit strategy, if the state association is not satisfied with SecureCare's performance and contract delivery on behalf of our doctors.

The agreement largely meets the above criteria. While our three states preferred that the agreement be more specific about what SecureCare considers “marketing support” by the state association and how each state would be assured a seat at the table, there are merits to maintaining some flexibility.

We are not convinced that the potential revenue to the association is as high as SecureCare projects, but we are guaranteed a minimum of \$10,000 per year – which is \$10,000 more than we are receiving now. The “messenger model” remains intact: doctors will have an opportunity to review all contracts and make individual decisions regarding participation.

Perhaps most importantly, the agreement provides that if the individual state association is not satisfied with SecureCare's strategies, transparency, or actions, it can discontinue the agreement and notify its members that it has done so. Additionally members can still continue to participate with SecureCare if desired, regardless of the association's status.

The UVCA Board of Directors voted unanimously on October 10<sup>th</sup> to sign the new SecureCare marketing support agreement. The association will keep members posted as more details emerge. In the meantime, the UVCA does not see any negative impact on the doctors. SecureCare is convinced it can move forward more efficiently in expanding its access to other state associations and the doctors they seek to serve, further strengthening its position in the marketplace. The UVCA will have a seat at the table and a realistic exit option. Doctors retain full control over which contracts they participate in and which they do not.

Existing provider doctors do not need to do anything because of this change, since their network agreement is with SecureCare, not the ECA-IPN.

While the ECA-IPN as a collaborative organization will no longer be a part of the new SecureCare marketing support agreement, the corporation will remain intact for the foreseeable future. Our three states have benefitted significantly over the years from sharing insights, experiences, and diverse perspectives. We intend to explore other ways in which we can collaborate, whether that involves continuing education, national-level legislative activities, education of insurance companies, or other member benefits programs.

If you have any questions, feel free to reach out to executive director Julie Connolly or any member of the UVCA board of directors.

Continued from page 21

Newport News which treats all ages & conditions. Competitive salary and full benefits- medical, dental, PTO, IRA match, malpractice ins. Great opportunity to treat a variety of issues & work closely with medical community. Contact: (757)873-8701 nrebound@aol.com. [listing#040822a]

Richmond: Full time DC associate wanted. Well established clinic using manual adjusting techniques, physiotherapies, rehab programs & acupuncture to achieve the best results for each patient. Will provide mentoring & support to grow. Buy in opportunity after two yrs. Guaranteed base salary+ incentive pay, retirement plan, paid malpractice insurance & time off. Must be licensed in Virginia. Email resume to rulichiro@gmail.com. [listing#122721a]

Incredible opportunity for a Virginia Chiropractic Physician looking to establish roots & join our growing team. Our evidence-based practices focus on 5 C's. Compassionate Care, Competence, Collaboration, & Clinical outcomes. Superior compensation package w/bonuses. Robust health benefits, matching 401k, malpractice, CE, license renewal, & available

student loan & moving assistance. Up to 3 wks of PTO. No Saturday hrs. Submit CV confidentially to ContactUs@VACHiros.com.

Wanted: Dr w/great adjusting skills, basic knowledge of nutrition, basic applied kinesiology a +. We are an integrative practice of DCs/ applied kinesiologist, acupuncturist, nutritionist, MTs. Send your resume to drtomroselle@gmail.com. Salary, Bonus, Benefits (health insurance, malpractice insurance, 401K, paid vacation & holidays, possible stock options.) www.rosellecare.com.

Kaizo Health, a rapidly growing Chiro, PT & Rehab co is looking for highly skilled, ethical DCs w/ exc clinical, interpersonal & comm skills. Competitive salary, bonus structure, benefits plan inclusive of health, dental, life, long term disability insurance as well as cont ed benefit, 401K match, ownership plan, more. For more info, pls contact Dr Jay Greenstein, drjay@kaizo-health.com.

The Joint Chiropractic in Northern Virginia/Richmond is looking for full time & part time Drs. All cash practice, great adjustment skills required. Competitive Salary & great environment w/benefits & bonuses.

Please email your CV to Dr Ahmed Migdadi amigdadi1988@gmail.com or fax to (888) 503-7522.

## Practices

Virginia Beach practice for sale. Doctor relocating. Take over our office in busy shopping center. Cash practice. Grossing over \$200,000/year. Price negotiable. Great opportunity for the right doctor. Contact j.miller26576@gmail.com. [listing#042822b]

Practice in Williamsburg, doctor retiring. Turnkey, 3,000sqft office fully furnished & equipped. 65% cash collections. Digital X-Ray, 10 treatment rooms, 5 Lloyd Cox tables, 2 Earthlite electric lift massage tables, 2 Acupuncture Tables, Acugraph Software, exam table, rehab equipment, Foot Levelers scanner/software, consult room, 11 computers, Chirotouch software, up to date HIPAA program, lots more. The price is negotiable for the right buyer. Contact wgqwork@gmail.com. [listing#041122a]

Looking to start a practice on your own? Get a head start. A 35 yr established practice in the beautiful Shenandoah Valley, Virginia. A multi-generational traditional chiropractic family practice. A great place to live a healthy and meaningful chiropractic lifestyle. Send inquiries to doccheff@gmail.com. [listing#032822a]

Busy single doctor 40 y/o chiropractic/acupuncture practice for sale. Great location for office & home. Excellent staff & very low overhead. Will stay w/the new doctor for smooth transfer & patient confidence. 804-233-9244. <https://www.drgeorgechirkinian.com/> [listing#031622a]

Yorktown VA Practice for Sale. Doctor retiring. Home/office complex. IDEAL location with exceptional visibility. Located on a well traveled road within a great school district. Very low overhead. Selling patient list, equipment, supplies, and building/property together or separately. Patient book of business, supplies, and equipment \$59,000. Owner financing of patient book of business, supplies, and equipment possible with 20% down payment. Email questions to cpkjsk@cox.net. [listing#102122a]

Wonderful and rare opportunity in Pennsylvania: This practice for sale

is a gem, as the owner works but 30 hours per week and the profits are outstanding. The building is a stand-alone and gorgeous. There is a possibility to purchase the building with the practice. A full appraisal has been performed and this is bank approved and SBA approved purchase. Very quaint and very attractive lifestyle for the right doctor to take control. For full details contact: Outlook Practice Sales, Inc. - Kip G. Sarby: (800) 806-1650 or email at info@outlookpracticesales.org. [listing#030122a]

Affordable chiropractic practice for sale in Roanoke Virginia - priced for a quick sale! Owner needs to relocate asap. Smaller practice collecting avg of \$85k/yr but Seller has physical limitations, so potential to grow! For more info, see [www.strategicdc.com/21905](http://www.strategicdc.com/21905) or email info@strategicdc.com. [listing#020322a]

Established practice since 1982 looking to retire. Mainly using Diversified, Thompsons & Cox Technique w/some SOT & Activator Methods used. Over 400K in Collections, located on high traffic volume main road 901 First Colonial Road, Virginia Beach, VA 23454. Contact: Dr Patrick Patzer DC PC Cell 757-651-1575. [listing#051122]

## Space Available

Space for Lease in Fredericksburg: rooms available in an established chiropractic and massage wellness center in downtown Fredericksburg. Prefer a chiropractor interested in individualized holistic care in a small office and collaboration with colleagues. Please contact Christine Thompson for more details. [cthompson@whole-health.net](mailto:cthompson@whole-health.net) or (540) 809-4223. [listing#050122a]

Independent Contractor Space Available. Ashburn VA (One Loudoun). Prefer like minded chiropractor/physical therapist with background in sports medicine and pain management. Potential to absorb patient overflow of current doctor. Office space is in a 2200 sq foot multidisciplinary practice with fully equipped rehab center. Text 703-975-3278 or email [admin@mybwdoc.com](mailto:admin@mybwdoc.com).

Turnkey space ready for lease. Currently fully furnished as a chiropractic and rehab minded 3700sq

Continued on page 23

# HELP US UNDERSTAND MORE ABOUT COVID-19

Our office is participating in a national research survey about the effects of COVID-19. All chiropractic patients over the age of 18, whether new or life-long are invited to take part.

## It's as Easy as 1-2-3

1. Scan the QR code below.
2. Answer a few questions.
3. Hit submit.

You may also access this survey by visiting:  
<https://form.jotform.com/210875576421156>.

If you have any questions, you may reach out directly to the investigators at Life University at 770-426-2639 or [Research.Studies@LIFE.edu](mailto:Research.Studies@LIFE.edu).



**LIFE**  
University  
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This study has been approved by the Life University Institutional Review Board.

# Medicare Compliance Essentials Webinar



**Live Webinar:**  
**Saturday**  
**February 12**  
**9:00 AM - 3:30 PM**

**Online/On-Demand:**  
**February 15**  
**through**  
**March 15**

**Instructor: Lisa Maciejewski-West, CMC, CMCA-EM, CMOM, CMIS, CPCO, Gold Star Medical Business Services**

**Up to 6 Type 1 CEUs for DCs in VA, MD, and DC**

**This six-hour webinar provides essential and comprehensive information regarding Medicare. It is relevant and timely to both those who are new to the world of Medicare and those who aren't; those who currently participate in Medicare and those who don't.**

**Medicare is confusing and difficult to keep up with. Those who feel they have a full and current understanding frequently discover changes or nuances they missed. And even those who do not participate in Medicare need to ensure they are properly NOT participating. Don't miss this convenient opportunity to make sure you're doing things right.**

**Lisa Maciejewski-West founded Gold Star Medical Business Services in 2006. Her 35-year career in the chiropractic, medical and dental fields, including 10 years as a Senior Practice Consultant and Speaker/Trainer with one of the largest Practice Management firms in the U.S., has helped her develop a well-respected company that provides a variety of practice assistance and development services. Lisa is a Certified Medical Coder (CMC), Certified Medical Compliance Specialist (MCS-P) and a Certified Medical Office Manager (CMOM). She teaches medical coding and billing school "boot camps" designed to introduce individuals to the career field of medical billing and to provide a training platform for new Gold Star Billers. She is a faculty member of Practice Management Institute and teaches billing, coding, compliance, and practice management classes and webinars to hospitals, multi-specialty provider groups, and chiropractic state associations nationwide. In 2021 the UVCA approved a valuable member affinity program with Gold Star and named Lisa and her team the UVCA's primary member source for help with billing, coding, documentation, Medicare, compliance, and other questions.**

**For a complete program outline or to register, go to [www.virginiachiropractic.org](http://www.virginiachiropractic.org).**

**Special Member Rates**

**CAs FREE with DC Registration**

*Continued from page 22*

clinic located in the Willow Lawn desired area. Complete furnished rehab gym as well as multiple exam rooms. Looking to sublease to multiple DCs. All utilities/Rent/Cam included for flat monthly fee. Please contact Kelly at 804-402-3813. [listing#012922a]

Independent Contractor Space Available. Arlington VA (Courthouse Metro).

Prefer like minded chiropractor/physical therapist with background in sports medicine and pain management. Potential to absorb patient overflow of current doctor. Office space is in a 3700 sq foot multidisciplinary practice with fully equipped rehab center. Direct proximity to metro with patient parking available. Call 703-465-1213 or email [contact@schrefflerchiropractic.com](mailto:contact@schrefflerchiropractic.com).

## Equipment

Practice Closing - Equipment/furniture for sale. Brand new Spinalator Armedica Q400, 3 Thompson Drop tables - need new upholstery, benches, large professional desk (2), chairs, art - for full list/pictures - email [bglasman@yahoo.com](mailto:bglasman@yahoo.com) or text 703-477-9661. [listing#041422a]

Biomeridian MSA with all accessories. Laptop not included but software can be added to any laptop. Includes Standard Process/Mediherb testing kits with display case. \$1200. [sbanksdc@cox.net](mailto:sbanksdc@cox.net). [listing#041322d]

Multiple Navy Blue Chiropractic Flat benches for sale. \$500 each. The more you buy, the better the discount. Pickup locations are in Ashburn, VA. We are willing to deliver. Email [admin@mybwdoc.com](mailto:admin@mybwdoc.com) for more information. [listing#4/13/2022]

Hill Labs Air-Flex with lumbar and pelvic drops. Just bought new in 2020. Excellent condition. Barely used. Color is black with upgraded covering. Paid a little over \$8000 a year ago. Asking \$5250. Email me for pictures and any additional info. [dr.placide@hopechirova.com](mailto:dr.placide@hopechirova.com). [listing#032122a]

Items for sale: 3 Chattanooga therapy tables with tilt head piece; Clear Institute Scoliosis Chair; Total Body Rehab Tri-Flex; 206 EMS; Lloyd Hi-Lo with all drops; Nervoscope; Algometer (activator method); Viewbox 31x38; Chiro Centennial framed poster; Hydroculater with packs; Hydroculater table; 17 rare earth cassettes; Huge box of Pete Fernandez's tapes & books; and Xray Machine w/total darkroom equipment. Dr. Knapp - 703-206-8063 - [vcaclinic@gmail.com](mailto:vcaclinic@gmail.com). [listing#030922a]

MXR Imaging has been the country's leading provider of diagnostic imaging equipment and service for over 60 years. MXR offers a wide array of chiropractic table options that include adjustment tables, decompression tables, intersegmental traction tables, and spa/massage tables. We are proud to say that we offer the widest selection of chiropractic specific direct digital x-ray solutions, accessories, and supplies. Visit <https://www.mxrimgaging.com/>. [listing#020122a]

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# Neuromusculoskeletal Medicine Program



**March 5-6, 2022**

## **“Whiplash Associated Disorders: The Pathway from Acute to Chronic Pain”**

**By James J. Lehman, DC, FACO**

**PLUS**

## **“Evaluation & Management of Foot & Ankle Conditions”**

**By Ed Glaser, DPM**

**Live Webinar**

**10 Type 1 CEUs**

**STANDS ON ITS OWN** as a single seminar OR as part of the 50-hour NMSM Program from the University of Bridgeport.



### **Part 1: Whiplash Associated Disorders: The Pathway from Acute to Chronic Pain**

This six-hour presentation will discuss the history of the whiplash injury, previous and current scientific studies, which will demonstrate the homogeneity and complexity of the whiplash associated disorder. This didactic presentation will engage the attendees and enable them to easily implement the recommendations that will improve quality of care for their patients suffering with whiplash injuries. The doctors will be provided a list of reference articles that support the presentation with peer-reviewed evidence.

Dr. James J. Lehman is a board-certified, chiropractic orthopedist, tenured, Associate Professor of Clinical Sciences, and Director of the only three-year, full-time neuromusculoskeletal medicine residency program leading to board certification as a chiropractic orthopedist. He has taught post-graduate chiropractic orthopedics since 1998. Dr. Lehman has been recognized as Academician of the Year by the American Chiropractic Association and Professor of the Year by the University of Bridgeport College of Chiropractic.



### **Part 2: Evaluation & Management of Foot & Ankle Conditions**

In the foot, more than anywhere else in the body, the posture of the foot dictates how it functions. Learn how arch height turns the foot from a propulsive lever to a loose adaptor to earth. Learn how to use postural changes in the foot to reverse 25 of the most common orthopedic diagnoses without surgery. MASS Posture Theory, taught by its inventor, is replacing common Podiatric misconceptions about how the foot works with a sound, physics-based approach that makes significant positive changes in the gait cycle to improve efficiency, endurance, and strength while reversing deformity and injury. Learn how MASS Posture can be applied to improve patient outcomes and better hold Chiropractic adjustments. Stop fighting a tug of war with gravity; instead, make gravity work for you. Form follows function -- not only in the direction of disease and deformity, but also in the direction of health and reversal of deformity.

Relax, Release, Relief is a series of relaxation techniques that are designed to manually, mechanically, interrupt the positive feedback loop that IS almost ALL chronic pain with the notable exception of Gout, Direct Nerve Compres-

sion, Neuropathy, and the pain of muscular development. When performed properly there are NO side effects except the elimination of pain, disappearance of trigger points, and restoration of range of motion where anatomically possible (not in fusions or bony obstruction). The techniques demonstrated are non-invasive, drug free, very gentle, and easy to learn. This puts almost all cases of Fibromyalgia and most CRPS in remission. It works on old and new fractures, post-implant pain, athletic injuries, pulled muscles, RLS, torn connective tissue, frozen joints and many more etiologies. One possible theory for this phenomena is discussed, although much more research is needed.

Edward S. Glaser, DPM studied mechanical engineering at SUNY Stonybrook, and his DPM at the New York College of Podiatric Medicine. He developed his own successful practice over thirteen years, leaving to further his MASS Posture Theory. He founded Sole Supports in 1992.

## Live Webinar Schedule

### Sat., March 5, 6 Hours, Dr. Lehman:

9:00-10:00 a.m. Class	2:15-2:30 p.m. Break
10:00-10:15 a.m. Break	2:30-3:30 p.m. Class
10:15-11:15 a.m. Class	3:30-3:45 p.m. Break
11:15-11:30 a.m. Break	3:45-4:45 p.m. Class
11:30-12:30 p.m. Class	
12:30-1:15 p.m. Lunch Break	
1:15-2:15 p.m. Class	

### Sun., March 6, 4 Hours, Dr. Glaser:

9:00-10:00 a.m. Class
10:00-10:15 a.m. Break
10:15-11:15 a.m. Class
11:15-11:30 a.m. Break
11:30-12:30 p.m. Class
12:30-1:15 p.m. Lunch Break
1:15-2:15 p.m. Class

***Recording not available for watching later.  
The two presentations are not available ala carte.***

## Registration Fee

Premier Member		Other Member		Non-Member	
By 2/10	After 2/10	By 2/10	After 2/10	By 2/10	After 2/10
\$275	\$305	\$305	\$335	\$355	\$385

### NOT A UVCA MEMBER?

You are welcome to attend as a non-member. However, members save big on registration -- plus enjoy other valuable benefits .

## CEUs

Up to 10 type 1 CEUs are approved for Virginia, Maryland, and Washington, DC. To see if the UVCA can obtain approval for other states, contact the association office as early as possible.

## Cancellation

If written notification of cancellation is received at least 72 hours prior to start of convention, payment will be refunded, minus a \$55 processing fee. No refunds or credits issued within 72 hours of program or for no-shows. Any and all mandated health risk mitigation will be in place. No penalties if health concerns cause you to cancel attendance prior to event start.

**To Register**

**Visit [www.viriniachiropractic.org](http://www.viriniachiropractic.org)**

**Questions?**

**Call the UVCA office at 540-932-3100 or  
email [admin@viriniachiropractic.org](mailto:admin@viriniachiropractic.org)**



## Unified VCA Education & Events

Saturday, February 12

### Medicare Compliance Essentials - *LIVE WEBINAR*

By Lisa Maciejewski-West, CMC, CMCA-EM, CMOM, CMIS, CPCO  
Also Available Online/On-Demand February 15 through March 15  
6 Type 1 CEUs for DCs in VA, MD, & DC

Saturday, February 19

### District V Connection:

### Golf Outing + Golf Swing Mechanics Class – *IN PERSON*

Top Golf, Virginia Beach, VA

By Robert Thoma, DC, Certified, Titleist Performance Institute

Hosted by District V Director, Dr. Christine Fallwell

1 Type 1 CEUs for DCs in VA, MD, & DC

Saturday-Sunday, March 5-6

### Whiplash Associated Disorders & Foot & Ankle Conditions - *LIVE WEBINAR*

By James J. Lehman, DC, FACO & Ed Glaser, DPM

Not Available Afterwards

10 Type 1 CEUs for DCs in VA, MD, & DC

(Also Fulfills Hours for the NMSM Program from Univ. of Bridgeport)

Friday-Sunday, May 13-15

### Spring Convention -- *IN PERSON*

The Omni Homestead Resort & Spa, Hot Springs, VA

More details, registration available soon!

More Online/On-Demand for DCs & CAs:

- CA Training from Assistants for Chiropractic Excellence
- CEUs through ChiroCredit.com & EON!
- DOT Testing through TeamCME & NYCC
- Rad Tech CEUs through mycourse

For details, updates, pricing & to register, go to [www.virginiachiropractic.org](http://www.virginiachiropractic.org) & click on Calendar. See Supplier Member event listings, too!

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website at [www.bryanne.com](http://www.bryanne.com) or call us at 877-279-2663. [listing#123122a]

FREE: New unopened x-ray film (1 box 35x43 & 1 box 24x30), used cassettes, additional leftover film, developer & fixer ALL FREE. Pickup at Family Chiropractic, office of Dr. John Lemon. Call 804-758-1800. [listing#011922a]

Barnes Hi-Lo Chiropractic Table with Pelvic Drop. Used & in Good Condition. Table is in Roanoke (24018). Ready for pick up. \$250 negotiable. Call/text Tanya at 239-

888-5114 or email [TanyaFit@yahoo.com](mailto:TanyaFit@yahoo.com). [listing#111621a]

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## The Virginia Voice

Winter 2021-2022

The Virginia Voice is the quarterly newsletter of the Virginia Chiropractic Association, dba Unified VCA, PO Box 15, Afton, VA 22920, [virginiachiropractic.org](http://virginiachiropractic.org).

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## Dues & Taxes

We estimate that 78% of VCA dues are not deductible as a charitable contribution, but may be deductible as ordinary and necessary business expense. The remaining 22% is allocated to lobbying expenses and is not deductible. Further info. should be obtained from your tax advisor.