

UCA's Association Lineage Tells us that Unity/One Voice Breeds Legislative Success

History tells us here in Oklahoma, that the Chiropractic profession has had more legislative success when one voice with the same message/agenda is delivered at the Capitol. For the most part, that was the case throughout the 1900's until approximately 1985. The Chiropractic Association of Oklahoma (CAO) was the only Association with a lobbyist, when a separate association sprung up, mainly to acquire membership dollars for the founder to use for reimbursement of travel and entertainment expenses for what he considered to benefit Chiropractic. That action resulted in a small group of other DC's forming another group with the sole purpose of discrediting that splinter group and be recognized as an elite fund raiser.

None the less, even though there were those multiple groups for approximately a decade, they realized that working harmoniously together as the Joint Chiropractic Association (JCA) with a combined board of directors and one voice the Capitol was far more beneficial for the better good of the whole profession. Consequently, the leadership of all three groups basically dropped their identities with their individual Associations, portraying an even stronger bond to the profession and the Legislators. As a result, the JCA passed or killed 38 pieces of pro or anti-Chiropractic legislation respectively, during the 1985 through 1989 legislative sessions.

Despite very fruitful times for Chiropractic, when a DC on the four-person OBCE lost his bid for the Presidency of the Board; he and a few other DC's, one of which had influence with most insurance companies and all of them paranoid about the Pharmaceutical issue, founded the OSCA and hired their own Lobbyist. The Lobbyist who had been fired by the JCA due to undermining a legislative agenda, was glad to work for the OSCA to get revenge. So, consequently, like the same scenario we have today, the dichotomy in legislative agendas and goals brought an end to continual legislative success at the Capitol.

Since 1989, we are the only Healthcare discipline that has gone up there almost every year and unilaterally filed separate bills without the support of both associations; sometimes confusing Legislators by opposing the other Association's bill or agendas. Many Legislators become confused and see us a divided, and therefore, reframe from voting on the bill or ask the Medical Association how they want them to vote.

As mentioned previously, one of the organizers of the OSCA had ties to many insurance companies as their claims cutting consultant. By 1993, privy to the fact that insurance was heading into managed care PPO's and HMO's, he convinced OSCA leadership and others to invest money into the founding of his Independent Physicians Association (IPA); a business that would make them participating providers in managed care contracts he would negotiate. Some of these contracts would become "exclusive" for providers who were prominent investors, allowing no out of network provisions. Other non-exclusive contracts would allow a large number of DC providers. The common denominator for all who wanted to be a provider, was being a member of the OSCA. Hence, it was quite easy for the OSCA to recruit 350 DC's as members. Each member would then pay a monthly client fee to the IPA, called the Oklahoma State Chiropractic Independent Physicians Association (OSCIPA). That fee of \$100 - \$2,800 per month was based on the number and amount of insurance claims you filed each month.

However, in 1997 the OSCA and OSCIPA marriage dissolved when a past President of OSCA and his buddy could not convince OSCIPA leadership to award them as exclusive providers in their respective

communities with most PPO's and HMO's. Obviously, that would have initiated a landslide of the same request from other DC clients in other communities, and as a result, create a mutiny by the majority of OSCIPA's non-exclusive clients. With OSCIPA divorcing the OSCA, they no longer required their clients DC's to hold an OSCA membership, the latter's membership numbers dropped by 60%. However, they continued to sponsor CE seminars and have a presence at the Capitol; with their primary being to be on the lookout for a Chiropractic Pharmaceutical Bill and kill it. Not unlike today, they continually pre-warned the Legislators it was coming, when not even a bill for the appropriately trained DC to prescribe or dispense even a muscle relaxer or anti-inflammatory existed. Tired of "crying wolf", this eventually causes the Legislators to not listen to anyone in our profession.

In 2001, after 13 years of the JCA and OSCA wasteful spending on extra unnecessary CE seminar overheads for both to financially survive, and two Lobbyists who many times took different messages to Legislators that caused confusion and non-cooperation; the JCA was finally able to convince all but three of the OSCA Board members that five representatives from each Association needed to sit down at the table to discuss the issues. Low and behold, we agreed on how to resolve 95% of the issues and the Unified Chiropractic Association of Oklahoma was born. Both sides realized that if we didn't go to the Capitol with one voice with the same agenda(s), we would continue to suffer the consequences of failed legislation.

For the next 10 years, except for one of those uncooperative three DC's who most Legislators considered an insignificant "loose cannon" regarding the drug issue, the UCA carried "one voice" to the Capitol. There was one other time during Workers Compensation Reform at the forefront of the Legislature, when OSCIPA, masquerading as a bonafide Chiropractic Association because they had been sponsoring CE seminars since 2004, attempted to use its Managed care influence to convince Legislators that their client doctors were better trained and more deserving to be the exclusive providers for the injured worker. That didn't fly back then, and because the UCA and OCA have not teamed up to collaborate, coordinate and present all the factual evidence to the right entities, today, we still are not part of the Work Compensation System. The UCA has all the findings collected by MGT America, a research group that we hired in 2004 to gather Workers Compensation outcome statistics. We now have more recent outcome studies that have been conducted across the USA, available from our Oklahoma Delegate to the American Chiropractic Association (ACA).

Since the 2012 founding of Oklahoma Chiropractors Association (OCA), a group of DC's whose foundation was and still is primarily composed of DC's associated with an Oklahoma City DC's Practice Management entity, Oklahoma DC's have been bombarded with OCA's unsubstantiated rumblings that the Unified Chiropractic Association is filing a bill to expand the Chiropractic Scope to include Pharmaceutical authority. They have even gone as far as stating that a bill filed by the Pharmacy Association was the UCA's bill. Further they paint UCA loyalists as want to be Medical doctors/Medipractors, who are willing to trade in the Chiropractic adjustment for drug privileges. Again, as with others in the past, there has been no sign of that being pursued at the Capitol and once again, only serves to expose Legislators to the profession's "dirty laundry", the philosophy difference even DC's are tired of hearing about. All the while, the echos of this from different sources make the AMA & OMA smile and think, "Yah, Cultist Chiroprists; let us know if we can help squash the terrible lies those progressive DC's dreamers taught about your education, qualifications and capabilities".

Is it not time to demand that those few who want the other 95% to practice like them, put away their accelerant on the drug issue, at least until the spark actually becomes a flame from a candle. As brothers and sisters of our Chiropractic family, we all believe the subluxation complex and its correction by the adjustment is our foundation. So, let's demand that even if we do not sit down at the table, our Chiropractic leaders and representatives speak to the facts and issues and not our different practice philosophies. From this date forward, let's keep what non-DC's do not realize or care about, as a mere conflict within our profession for us to hopefully resolve with facts and truth, not accusations.

Yours in Chiropractic,

Tom Derstine, D.C.
UCA Executive Director