

BILLING / FEES / INSURANCE

In the Beginning...

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Wilshire Boulevard, Beverly Hills, California. I must have been daydreaming as I walked home from high school, because I bumped right into a strange looking man. Asian and clothed in a brown dress, woven grass shoes and ponytail, he clearly was pleased to see me. He said he had been waiting for me all afternoon, and that he was to become my first teacher. The sacred medicine he would teach me would change the world, he promised.

That was in 1970. I was 14 years old. He was right.

Recently, I overheard a practitioner of three years bemoaning the loss of workers' compensation coverage and the effect it was having on her practice. With changes in California's laws, she would no longer receive reimbursement and her practice was stumbling. Her dilemma is a great example of how far we have come as a profession.

There are those who began practicing decades before anyone considered putting words like workers' compensation and acupuncture together on a page. A few dozen of us began when there was no government recognition for what we did, no insurance coverage, no schools, state licenses, associations, medical product distribution companies, practice management and marketing classes, malpractice insurance policies, government of private investment research -- even textbooks written in English. I had been practicing for over a decade before insurance company representatives had heard the word "acupuncture." I was practicing this medicine for six years before it was legal to do so in my state. There was no such thing as an acupunctureclinic. You got thrown in jail for having one of those. In some states, you still can.

For many years after acupuncture was legal in a few states, the only patients that came were those who were dying or willing to make one last stop before suicide just in case the flaky, new age "voodoo" doctor could pull their health out of a hat for them. There was no "I believe you can get me well" talk floating around my early clinics. Patients were willing to pay a few bucks to a medical "quack" as a last, desperate attempt to hang on to life. So much for the good old days. And to think the AMA determined that we relied upon our exaggerated market share of the placebo effect ...

I have come to realize there is a tremendous difference between those of us who began working in this field before it was one, and those whose studies and practices have been built on the foundation laid by others in the U.S. There have been strong OM practitioners here for over a century working with Asian communities. The profession that has blossomed over the past 30-plus years has spread beyond those boundaries and trains practitioners of all backgrounds and ethnicities. As our field blossoms during its fourth decade in the melting pot communities of this country, we hunger for those whose studies and experience can guide our own. This yearning is healthy. It is in harmony with the Tao.

I first heard the phrase "senior practitioner," a term coined to define and show respect for those of us whose entrepreneurial struggles paved the way for others, at the Texas State Acupuncture Association's annual conference. I was teaching there a few years ago, and was asked to sit on a

panel of "senior practitioners" for the Saturday night banquet. I had never thought about being senior at anything except my final year of high school. But later, I found myself on a stage eating my green beans while looking out at a sea of apparently "non-senior practitioners" eating their green beans. When dinner was over, we "senior" types answered questions hoping to spread the caliber of wisdom that would inspire pride in those thousand-year-old Chinese doctors. We are their professional offspring.

It is good to have a sense of the history we are making together. We all enjoy good stories. Those that come from "real life" can be the best. For example, as a teenager I could only buy needles (hand-made and tested through the tongue) in Chinatown opium dens. They were wrapped in little paper packages with ornate string knots. Whenever I went to buy them, I was spit on and shoved by angry Asian men for stealing their medicine, but those needles were worth it. No matter their size, their insertion was smooth and painless. They were magical, and I miss them. I know disposable needles are a valuable resource for our profession, and we would not be where we are without them, but sometimes I feel I am trying to paint a masterpiece with a paint-by-numbers brush. Hand-made needles have a soul. They vibrate with life. They are their own art form.

Have you ever required the use of a secret password in a language you don't speak to buy medical supplies? Ever bury needles hurriedly so the police at your door won't find them and lead you off to jail? Have you been arrested for practicing medicine without a license (because there was no such thing as a license in what you did)? Ah, those were the good old days.

It is a great tradition that we are associated with and building together. I hope to use this column to share some of the wonderful people and stories of our poignant, professional history. We are more than points and formulas. We have cross-cultural and cross-generational heart, rich customs that require transformation for our culture and patient base, and we have poetry sewn into the language of our work.

Are you blindsided when patients try to manipulate you? Do you hope to educate future patients and medical doctors without words like stagnation and *xie*? Do you have a difficult case or pressing concern no one has been able to address? Maybe I can help. I am, after all, a "senior practitioner!" Feel free to send me your questions at felice@felicedunas.com.

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