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## *Member Handbook*

American Manual Medicine Association  
American Medical Massage Association  
American Institute of Naturopathic Medicine  
National Association for Therapeutic Exercise  
National Governing Alliance of Allied Health Professionals  
National Governing Council Health and Education Partnership

## INTRODUCTION

Welcome to American Health Source, Inc.

This membership handbook has been created to assist you with questions concerning your membership, insurance, continuing education units and other subject matter pertaining to your AHS membership.

The last page of this handbook is space for you to record your membership number, insurance number and expiration date, renewal dates, exam dates, CEU dates and notes. You may make copies of this page to record future information you wish to keep in your files.

## DATES AND ID NUMBERS

Membership #:	_____
Renewal Date:	_____
Policy #:	_____
Certification Date(s):	_____
	_____
CEU Dates:	Program/Seminar Topic:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

## NOTES

## REINSTATEMENT OF MEMBERSHIP

To qualify for membership reinstatement the following procedures must be followed:

1. Complete a Renewal Membership Application.
2. Become current on your Continuing Education requirements. Our policy states that you must have your CEU requirements met within sixty (60) days of the acceptance of your renewal application.
3. If your membership has lapsed you will be required to become current with your CEU requirements including the two (2) years preceding your reinstatement application.

## GENERAL INFORMATION

### Returned Check Policy

If your check is returned by the bank as a non-sufficient funds check, you will be charged an additional \$35 processing fee.

Checks that have been returned by the bank and have not been satisfied after attempts at collection by AHS will be sent to a collection agency.

### Credit Cards

For your convenience, AHS accepts the following credit cards:

- MasterCard/Visa
- American Express
- Discover

You may also pay your membership/insurance by check or money order. Please do not send cash.

### Termination of Membership

A member may be terminated from an AHS association for:

- Non-payment of membership
- Violation of Code of Ethics
- Non-compliance of CEU requirements

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## CODE OF ETHICS

1. Provide the highest level of quality care to anyone that seeks your professional help.
2. Accept all clients without discrimination.
3. Respect the confidentiality of your client.
4. Practice only the techniques and modalities in which you have been professionally trained and certified.
5. In no way participate, engage, or suggest any type of sexual activity with your client.
6. Maintain a safe, clean and professional environment for clients at all times.
7. Do not publish sexually suggestive language or photographs in marketing, advertisements, or websites.
8. Dress in appropriate and professional attire. Do not dress in short shorts, short skirts, without a shirt or top, or dress in any manner that is sexually suggestive.
9. Make sure that your client is always properly draped with minimal exposure to the client and in a manner that projects client modesty.
10. Refrain from using profanity or crude language either with or to your patients or in marketing, advertisements, or websites.
11. Maintain standard professional boundaries with your clients in accordance with the requirements defined by the legal system relative to client abuse, whether financial, sexual or psychological.
12. Be observant of, and obedient to, the ordinances and laws of the state in which you practice as they pertain to your profession specifically, and health care in general.
13. In no way associate with, be affiliated with, work for, own, or be a partner in any facility, establishment, service, or activity that is deemed to be illicit, immoral or illegal, whether or not this activity has resulted in criminal conviction.
14. Follow all policies, procedures, guidelines, regulations, codes, and requirements promulgated by the American Health Source, Inc.

All American Health Source Association Members are expected to adhere to the highest standards in our industry. If for any reason, a member has violated the Code of Ethics, that member will be reviewed for appropriate action, up to and including dismissal from the association.

By submitting a signed application to American Health Source, you agree to abide by this published Code of Ethics and understand that a violation of any of the above codes will be cause for appropriate action or dismissal by the association.

## AHS APPLICATION

It is important that you fill out the membership application completely by printing the required information .

The first section is personal information, the second section is professional information.

The third section requires you to fill out the type of membership for which you are applying and includes an area to add funds for an additional insured. This section is for membership type only. Most members will either join as a Fellowship Member or a Professional Member (with insurance). Only students may obtain the student membership with reduced insurance fees.

The next section is your method of payment, and finally the last section is the agreement. Please read this carefully before signing. Additionally, by signing this agreement you have agreed that you have read and consented to follow the AHS published Code of Ethics.

Once your completed application is received in the AHS office it is processed within three business days and sent to the Insurance company for final review. Upon approval, the insurance company will send you your declarations of coverage. Please retain this information for your records.

AHS processes your application by entering the information you provided in the database and you are assigned a membership number. Within two weeks you will receive a membership certificate and membership card. Both of these documents display your membership number. Each year as you renew your membership, you will be sent a replacement certificate and card showing your current membership dates. Your membership number stays the same.

## CONTINUING EDUCATION UNITS (CEU)

### Continuing Education Requirements:

You must have met your CE requirements before you can renew your membership and/or to maintain your certification.

- All AHS associations require members to fulfill a minimum of twelve (12) CEUs annually;
- Diplomate or advanced training status in an AHS association may require members to fulfill eighteen (18) CEUs annually

### First Year Student Requirements:

Upon graduation of an approved program members who initiated their membership while in school have one (1) year from their original AHS expiration date to fulfill their CE requirements.

### CONTINUING EDUCATION (CEUs)

Continuing Education is required to maintain your membership and/or certification from the National Board Certification Agency; however, it is equally important that you maintain and update your skills regularly. Whether you need 6, 12 or 18 Continuing Education Units per year, AHS provides a multitude of opportunities in order for you to fulfill your required number of CEUs.

### Obtaining CEU's:

The AHS offers several options for obtaining Continuing Education:

1. Attend an AHS seminar. Registration forms are located under the "Seminars" section of the "Education" link on the AHS website.
2. Purchase a CEU CD program, also found in the "Education" section of our website, under "Continuing Education Programs." Complete and return the accompanying quiz and you will be credited three (3) CEUs per program completed.
3. Attend a seminar that is not sponsored by AHS, but has AHS approval. As with any non-AHS sponsored seminar, send in proof of the CEUs you have taken and we will send out your AHS letter of compliance. ***\*Please obtain prior approval from AHS before attending this type of seminar to ensure you will receive your CEU credits.***

Keep in mind that if you do not meet your Continuing Education requirements by your expiration date, you are jeopardizing your status as a member in good standing with AHS. If you have questions, please do not hesitate to contact American Health Source directly.

## MISSION STATEMENT

The mission of American Health Source is to promote the advancement of scientifically based complementary and alternative health care education and training, testing and examination, and image and recognition within the allied health care community.

The American Health Source family of organizations seeks to distinguish themselves as Associations dedicated to serving the professional needs of the individual by uniting the efforts of all members of the health care professions who practice complementary, alternative and allied health care.

American Health Source seeks through their efforts to uplift scientifically based complementary and alternative medicine to the level of accepted medical specialties within the allied health care community. American Health Source professional associations welcome as members all individuals who practice the scientifically based health care professions of manual therapy, massage therapy, naturopathy, naprapathy, acupuncture, medical assisting, personal training, and holistic health.

## LIABILITY INSURANCE

Typically, your membership application or renewal notice is also your application for liability insurance. All AHS Association memberships are \$100. If you are a practicing professional, it is very important to carry liability insurance in the event that a problem develops with a patient and you are sued for malpractice.

All AHS liability insurance is presented by Allied Professionals Insurance Group, RRG. Discounted student pricing is available only while a member is actively taking classes for a covered profession.

All policies are occurrence-based. This means that if an incident occurs while you are under this plan, the incident is covered even if you are no longer insured with AHS or Allied Professionals Insurance Group.

You are covered under this plan wherever you practice, as long as you are a law-abiding professional. If you fail to abide by local and/or state laws regarding your profession, you will not be covered.

Coverage Limits: (No deductible)

Each Occurrence (Professional & General Liability).....	\$1 Million
Annual Aggregate.....	\$3 Million
Product Liability.....	\$1 Million
Personal Injury & Advertising Injury.....	\$1 Million
Fire Damage Liability.....	\$50,000

Exclusions: Sexual Abuse, Acquired Immune Deficiency Syndrome, Communicable Disease.

You are not covered by this policy if you exceed the legal limit of your scope of practice, as defined by state and local regulations or board rules.

### **POLICY EFFECTIVE DATES**

The effective date of your insurance is the date that appears on your insurance declarations page when you receive it. You will receive your confirmation of insurance directly from the insurance company, separate from your AHS membership packet.

## MEMBERSHIP INFORMATION (continued)

American Health Source (AHS) was formed to set a higher standard of education in the complementary, alternative and allied healthcare fields. AHS requires that minimum standards of educational hours, or comparable state regulated requirements, be met for association membership.

Among the many services AHS offers to its members are:

- \* Certifications and Examinations for various health care professions
- \* Professional Liability Insurance
- \* Health, Dental and Disability Insurance
- \* Legislative Assistance
- \* Continuing Education Programs
- \* Live Seminars

### **NEW MEMBERS**

New members are required to meet the following requirements to join an AHS professional association:

- \* Meet the minimum education requirements as outlined by the applicable professional association
- \* Complete the application and make payment for either:
  - Fellowship Membership (without liability insurance)
  - Professional Membership (with liability insurance)
  - Association Affiliate Membership (existing AHS members)
- \* Read and accept the published Code of Ethics
- \* Provide proof of education/training via school transcripts

### **STUDENT MEMBERS**

- \* Attendance at a school providing the minimum hours of training required by AHS, or comparable state regulated requirement, in an applicable complementary, alternative or allied healthcare field.
- \* Submit a completed application and payment for a Student Membership (with liability insurance, must be in school)
- \* Read and accept the published Code of Ethics

## MEMBERSHIP INFORMATION

### **Renewing your Insurance/Membership**

If you are an AHS member you will automatically receive a renewal notice each year approximately 3-4 weeks prior to the expiration date.

Membership renewal notices come directly from the AHS office and Insurance renewal notices come directly from the insurance company. However, it is ultimately your responsibility to know when your membership and/or insurance expire. If you do not receive a renewal notice and think that your membership and/or insurance is about to expire, please contact the AHS office immediately.

### **Membership/Insurance Application**

It is important that you fill out your application as completely as possible in order for AHS to keep accurate records. *Always print information.*

You must sign and date the application for your insurance/membership to be valid.

When moving to a new address or if you have a name change, notify the AHS office of the change as soon as possible, or go to our web site to make the address change. You can print and mail a change of address form, or fill out the form and submit the changes directly online.

When making a name change, please submit proof of the name change to the AHS Office. Please attach a copy of the legal court record such as a marriage license, divorce decree or a court-approved name change document supporting the name change. If you wish to have a new certificate, please follow the directions of the Replacement of Certificates along with the proof of name change.

Please direct any questions you may have regarding your membership or liability insurance to the AHS Office.

888-375-7245

or at

info@americanhealthsource.org

## LIABILITY INSURANCE (CONTINUED)

### **Additional Insured**

If you are conducting your practice within another organization, such as a chiropractor's office, hospital, wellness center, spa, or other facility in which you are renting space, you may be required by that facility or landlord to carry them as an additional insured. The cost to add an additional insured ranges from \$10—\$25. You should check with the entity/landlord to see if this is a requirement on your part. If you are a student, your school may require you to list them as an additional insured.

If you are incorporated or have a partnership, it is recommended that you add your company name/partnership as an additional insured.

When adding an additional insured to your current policy, you need to have the following information for your additional insured:

- \* Name
- \* Address
- \* Telephone
- \* Property owner's name

You may add as many additional insured to your policy as you wish. The coverage of the additional insured will run for the life of the policy and will expire each year on the same date as your own liability insurance.

When renewing your insurance each year, the insurance addition will no longer be included in your policy so you will need to renew your additional insured when you renew your own insurance policy.

### **Non-Refundable Policy**

Your liability insurance is a non-refundable policy. This means that the insurance is in effect for one year from the effective date. *You cannot cancel your insurance or additional insured during the policy period and receive funds back.*

If you elect not to renew your insurance at the time that it expires, you can elect to obtain insurance at a later date as long as you maintain your AHS membership.