

JMCA Journal

May 2007

Volume XVI / Number 3



MCA Offering NPI/HCFA Forms Seminars

*Seminars to Clear up Confusion Regarding
New Provider Numbers and HCFA Forms*



May 15, 2007

Baltimore/Washington
Medical Center
301 Hospital Drive
GLEN BURNIE, MD

May 17, 2007

Comfort Inn - Easton
8523 Ocean Gateway
EASTON, MD

May 22, 2007

Holiday Inn - Fort Detrick
999 W. Patrick Street
FREDERICK, MD

*These seminars will teach you the proper use of NPI numbers and
the new HCFA form! The deadline to get your number is May 23!*

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President's Update

Donald Hirsh, DC

Help is on the Way!

In the last issue of the MCA Journal I wrote of reclaiming your passion. I am appreciative of all the kind words I received from you and I am thrilled to see so many doctors giving so much to our community. I realized that there are a number of factors lingering out there that are dulling our passion. In this issue I will take passion killers head on and offer hope for the future. Help is on the way.

In the good old days of chiropractic, documentation consisted of the date and segments adjusted. We could concentrate on sharing the story, hugging and loving our patients. Now we worry if they are going to sue or report us. We worry sometimes more about SOAP notes more than we do about results. Well, get over it. Times are not going back to those days and our patients deserve attention to detail. We need to learn to be more efficient and go back to hugging. I don't buy that good documentation and careful doctoring are incompatible with a passionate practice. Sorry, no sympathy on this one from me.

In the good old days we charged whatever we wanted to. Copays shmopays. No insurance, no problem, pay whatever. Insurance, wow, we'll charge for everything including pen rental. Prepayment for life no matter what you actually need. Sarcasm aside, I feel the difficulties of honestly and ethically collecting what we deserve, is the primary basis for most of the passion waning out there in practice. When people are not justly rewarded for pouring out their heart, soul and amazing skills there is a natural tendency to emotionally withdraw. This conundrum is, in my opinion, the crux of our passion problem.

Our uncertainty on how to ethically and legally bill has caused different problems. Some doctors overreacted out of fear (present company included) and unfortunately some have pushed the envelope and have gotten into difficulties with their patients and/or the Board. Those of us who acted out of fear have undercharged and often undertreated because they did not know the legal and ethical ways to treat cash patients and patients whose benefits were limited. Many were unsure how to charge for excluded benefits, such as when a patient is no longer experiencing symptoms, but wants corrective or preventative care. Fear, uncertainty and the financial difficulties took all the fun out of practice. My passion for practice was sucked right out of me. I know many of you are in the same boat.

The MCA has felt our pain. Our revitalized Insurance Committee has been diligently working to find solutions. The great news is there are honest, legal and ethical ways for getting you paid without fear. There are ways to get you fairly compensated and more importantly, to allow your patients to get the care they need by using transparent financial plans. We are diligently working to get this information to you soon. We have hired a professional billing and coding specialist to consult with our members and their staffs. We will also be presenting seminars to teach the correct way of billing, coding and handling financial relationships with our patients. Some of the topics will include: transitioning patients from acute insurance covered care to cash patients (wellness codes), time of service discounts for cash patients, correct ways to use prepayment plans and using excellent documentation to insure full payment for your services. We are excited about sharing this information with you and we look forward to igniting the passion again. Thanks to you, we are inspired and excited to help restore trust and fun back to practicing chiropractic.

Sincerely,

Donald W. Hirsh, DC

NPI Deadline Still May 23!

The US Centers for Medicare & Medicaid Services (CMS) continues to promote provider action on the National Provider Identifier (NPI), the standard unique health identifier health care providers will soon need to use in filing and processing health care claims and other transactions. The standard unique health identifier was mandated by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). HHS published the first announcement of the availability of the registration process in May, 2005. **Despite pressures for a postponement of the deadline from a number of health care organizations, the deadline by which all providers and covered entities must be registered is still set for May 23, 2007.**

Regarding Certification in Low Level Laser Therapy

Currently, the only two programs accepted for certification for Low Level Laser Therapy by Maryland's Board of Chiropractic Examiners are the 12-hour programs conducted by New York Chiropractic College and Logan Chiropractic College. **To obtain Board Certification, applicants must successfully complete either course and submit the documentation with a petition to the Board of Examiners.**

Important Information Regarding HCFA Forms and NPI Numbers

The MCA understands information on the new provider numbers and HCFA forms can be confusing. Below is information provided by Carefirst and NPPES that helps clarify some of the issues surrounding the HCFA Forms and NPI numbers. **IMPORTANT NOTE: MCA HAS PLANNED A SERIES OF SEMINARS ON THIS TOPIC. MAY 15 - GLEN BURNIE. MAY 17 - EASTON. MAY 22 - FREDERICK.**

The New HCFA Forms:

As of Monday April 2, CareFirst is accepting the new HCFA form. CareFirst has stated that they have put a special unit in place to handle the new forms when they come in. It is apparent that they are anticipating problems and are trying to make adjustments at their end to handle the coming situation. Everyone will be dealing with not only the use of NPI numbers but also the new HCFA form.

According to NPPES:

Insurance carriers can request that providers have an individual number and an organizational number (clinic, facility whatever you want to call it). NPPES has no authority to say how many numbers are required, they have only been hired to issue numbers.

It is suggested that a provider get two numbers – one for individual which is associated with the social security number and one for the facility which is associated with the Fed ID number (EIN). If a chiropractor applied for an individual number, the number issued is associated with the social security number.

The MCA is suggesting that members apply for an individual number and organizational number. The organizational number will be used on all claim forms or electronic billing and apply insurance payments to the Fed ID number on the EOB's.

The individual number will be used as the doctors identifier for Medicare claims, as in box 17 A. It will also be used when another Doctor wants to refer a patient to you and needs your NPI number – like HMO plans that send referrals, or a radiologist's office needs your NPI number for x-rays on a patient referred for films.

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Eye on Annapolis

2007 Legislative Session Ends With Positive Outcomes

Paul Henry, DC, *MCA Legislative Chair*

&

Joel Kruh, *Legislative Liaison*

The 2007 session ended April 9 and we are pleased to report that no bills were passed which will adversely effect Maryland's Chiropractic profession, and in fact some positive outcomes were achieved by the MCA legislative team. Below are summaries of key bills and their impact on our practices.

Please note, all bills dealing with expanding benefits for children, working families and the uninsured for the purpose of expanding health benefits to those groups were defeated this year. Many of these issues will be revisited in the 2008 session. The MCA along with our legislative advisors at Alexander & Cleaver feel this 2007 session was a successful one and have great hopes for positive outcomes from the reimbursement task force study.

SB107/HB138: Task Force on Health Care Access & Reimbursement

MCA strongly supports this bill that establishes a task force on health care access and reimbursement consisting of 14 members. The task force shall examine the following issues:

- 1) Reimbursement rates and total payments to physicians and other health care providers by specialty and geographic area and trends in such reimbursement rates and total payments, including a comparison of reimbursement rates, total payments and trends in other states.
- 2) The impact of changes in reimbursements on access to health care and on health care disparities, volume of services, and quality of care.
- 3) The effect of competition on payments to physicians and other health care providers.
- 4) The trends for physician and other health care provider shortages by specialty and geographic area and any impact on health care access and quality caused by such shortages, including emergency department overcrowding.
- 5) The amount of uncompensated care being provided by physicians and other health care providers and the trends in uncompensated care in Maryland and in other states.

6) The extent to which current reimbursement methods recognize and reward higher quality of care.

7) Methods used by large purchasers of health care to evaluate adequacy and cost of provider networks.

8) (i) The practice by certain health insurance carriers of requiring health care providers who join a provider network of a carrier to also serve on a provider network of a different carrier.

(ii) The effect of the practice described in item (i) of this item on health care provider payments and willingness to serve on provider networks of health insurance carriers.



MCA has requested that the so called Cram Down legislative proposals be incorporated into the task force review. Cram Down means that a provider that signs with an insurance carrier or HMO may not be required to participate in another network sold to a different carrier or entity. The task force shall report its findings and recommend actions to the Governor on or before December 31, 2007 or an extension if needed. An interim report and recommendations shall be filed by December 1, 2007 and a final report by June 30, 2008.

HB735: State Board of Massage Therapy Examiners- Licensure, Registration and Regulation.

This bill was defeated.

This bill proposed to create a separate Board of Massage Therapy Examiners under the State Health Department, instead of the current law of regulation by the State Board of Chiropractic Examiners. This is strongly opposed by the MCA and the Chiropractic Board. MCA's opposition was based on the fact that massage therapists are not sufficiently trained to develop their own scope of practice. Current regulation under the Chiropractic Board works exceptionally well, is cost effective and concurrently protects the public.

continued on next page

HB1083: Maryland Athletic Trainers Act.

MCA supported the bill with amendments, but it was defeated in 2007.

This bill proposed to create an Athletic Trainers Advisory Committee as a subunit of the Board of Physicians to regulate, license and discipline athletic trainers as a health care profession in Maryland.

The position of MCA was that an athletic trainer should be limited to treatment for sports related or athletic related injuries and not open ended treatment of any person. Athletic trainers are not doctors and do not have sufficient training, education or expertise to clinically diagnose conditions of the human body. This issue needs to be further evaluated and the role of athletic trainers in health care settings better defined.

HB425/SB389: Title Civil Actions- Liability of Insurer-Failure to Act in Good Faith.

This bill was passed awaiting the Governor's signature.

This bill establishes an unfair claim settlement practice when the property and casualty carrier fails to act in good faith in settling a first party claim. (PIP and Med Pay).

1) At the rate allowed under section 11-107 (A) of the Courts Article: and

2) From the date on which the insured's claim would have been paid if the insurer acted in good faith.

3) For a violation of section 27-303 (9) of this subtitle, the Commissioner may require restitution to an insured for the following:

(i) Actual damages, which actual damages may not exceed the limits of any applicable policy;

(ii) Expenses and litigation costs incurred by the insured in pursuing an administrative complaint under section 27-303 (9) of this subtitle, including reasonable attorney's fees; and

(iii) Interest on all actual damages, expenses and litigation costs incurred by the insured computed;

4) The amount of attorney's fees recovered from an insurer under paragraph (3) of this subsection may not exceed one-third of the actual damages recovered.

The effective date of this bill is October 1, 2007. For further details, contact Joel R. Kruh, Esq. at 410-685-662

Maryland Chiropractors Back the Birds!

Be part of the largest gathering of Chiropractors, family and loyal patients in Maryland history. A significant number of seats have been reserved for the Saturday, June 30, 2007 game against the L.A. Angels. This is a unique opportunity to show our strength in numbers. Special recognition of our group (we'll all be sitting together) will be broadcast on the Jumbotron.

Seats will be reserved on a first paid/first reserved basis and will be disbursed in the order they are received, so please purchase your tickets early. All ticket sales are final. **All proceeds will be donated to the MD C-PAC to help ensure the protection of Chiropractic in Maryland.**

Event: Orioles vs. Angels

Place: Oriole Park at Camden Yards

Date: Saturday, June 30, 2007

Time: 7:05 pm

Cost: \$10 per ticket

Questions: Call Dr. Scott at 410-544-7157

Name: _____

Address: _____

Phone: (H) _____ (W) _____

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Mail the form above and a check made payable to Dr. Keith Scott to:

Dr. Keith Scott
432 Benfield Road
Severna Park, MD 21146





One thing seems clear to me after three months as treasurer of our Political Action Committee – I keep seeing the same names contributing to the PAC. I’d like to ask for a favor from those who give generously. I’d like you to make one phone call this month to someone that you know and who is not on the list. Let’s get a few new names here and a few more dollars to make Chiropractic stay on the political radar of Maryland’s elected officials. I believe that this effort is worth a few dollars each week from our practices. Thanks for your generous contributions and please keep up the good work. Together we can make a difference and improve our futures.

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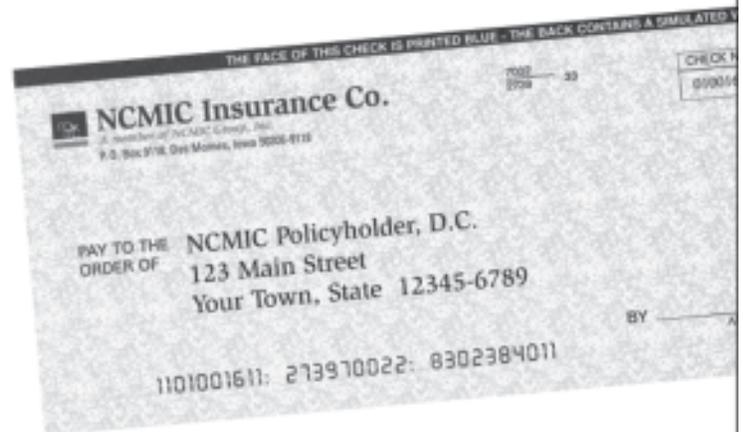
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ACA Update

By Audie Klingler, DC - ACA Maryland Delegate

ACA Needs Immediate Help with UHC/ACN Survey

The ACA is requesting your assistance with a serious issue that seems to be affecting many doctors. So far, the ACA has received complaints from 27 states reporting difficulties when trying to call for benefit information or to obtain pre-service approvals from United HealthCare (UHC) and ACN Group, Inc. (ACN). The ACA's goal is to provide information on this problem to the appropriate state regulatory agencies for their immediate attention and action. Please take a few minutes, as soon as possible, to complete an important survey. The survey is available online at www.zoomerang.com/recipient/survey-intro.zgi?p=WEB2263UH2ZF49. This link is also available from the MCA Web site, www.marylandchiro.com.

ACA and MCA Alarmed by Aetna Mid-Atlantic's New Policies

The American Chiropractic Association (ACA) and Maryland Chiropractic Association (MCA) have been informed of the new Aetna Mid-Atlantic policy distributed by American Specialty Health Networks which indicates that both interferential current therapy (IFC) and the use of manual spinal adjusting instruments are experimental and investigational and are therefore not covered. The Aetna Mid Atlantic region includes; Pennsylvania, Delaware, West Virginia, Virginia, Maryland, Washington, D.C. and Southern New Jersey. The ACA has numerous patient protection concerns with these policies including what it views as the immediate adverse harm to patients resulting from these misguided policies. The ACA is prepared to fight to protect the best interests of chiropractic patients and the right of providers to perform these services. IFC, a specialized form of EMS, is an integral and beneficial component of many providers' treatment plans. Manual adjusting instruments make it possible for many patients to receive manipulation who might not be able to otherwise due to their condition. The use of manual adjusting instruments also can facilitate extremity adjustment, and is an integral part of manual manipulation for many patients.

The ACA has attempted to contact Aetna in regard to these policy changes, which became effective on March 1, but to date, no response has been received. We would like to continue to work with Aetna to develop policies that are clinically sound, but we also feel it is necessary to explore other options for resolution to our concerns if collaborative efforts are not productive. The ACA has prepared handouts for patient education regarding these services both in a "Summary Version" and a "Detailed Version." Please print these and familiarize yourself with the references supporting these services here.

In order to assure continued patient access to these services, the ACA is considering taking this issue to federal court if all other efforts fail. If you have a patient who has been, or will be, affected by the deeming of these services as experimental/investigational and the patient is interested in asserting his or her right to these services, please contact the ACA. ***The ACA needs your help immediately.***

Please contact either Laurie Douglass at (703) 812-0227 or Thomas Daly, Esq. at (703)218-2110. We appreciate your help. Without your assistance we cannot advocate for your patients rights to these services.

New United Healthcare Policies

In light of the recent *Washington Post* articles concerning conditions at Walter Reed Army Medical Center and related deficiencies in the level of health care provided to America's military personnel and veterans – *it is important to call attention to another glaring example of the failure of the Department of Defense (DoD) and Department of Veterans Affairs (VA) health systems to deliver the type of health care services — including care for pain relief and rehabilitative care — that our men and women who have served or are currently serving in our military both need and deserve.*

Two bills recently introduced in the U.S. House of Representatives are aimed at making sure those who have honorably served our nation, and their dependents, are receiving the chiropractic benefit they are entitled.

HR 1470, introduced by Rep. Bob Filner (D-CA), calls for the full implementation of Doctors of Chiropractic in the VA health care system within four years. Currently, only 30 VA sites employ a Doctor of Chiropractic. *HR 1470 would expand that number to insure that DCs are at 75 major VA medical facilities within two years, and at all 154 major VA medical facilities within four years.*

HR 1554, submitted by Rep. Mike Rogers (R-AL), *would expand the current chiropractic benefit in the Department of Defense (now limited to only active duty personnel) to include all individuals covered under TRICARE, the military health care system, which includes retirees, dependents, and survivors.*

The importance and critical nature of the above legislation is made clear when one reviews available statistics concerning current war-related injuries. A VA report issued in November 2006 shows that *42 percent* of those returning from Iraq and Afghanistan seeking VA care, did so for ailments related to the musculoskeletal system.

ACTION NEEDED:

All Doctors of Chiropractic and chiropractic patients are urged to contact their members of Congress and urge them to CO-SPONSOR HR 1470 AND HR 1554

How to Contact Your Member of Congress:

Go to www.acatoday.com and click on the ACA Legislative Action Center.

Call Your Member of Congress through the Capitol switchboard at 202-224-3121

Questions?

Contact ACA Department of Government Relations at 703-812-0224 or gr@acatoday.org.

Report Issued on Chiropractic Patient Death in Canada

ACA is advising its members of an unfortunate report issued in Canada on April 12 by Quebec Coroner Dr. Paul Dionne, who released his report of findings and recommendations regarding the death of Pierrette Parisien, a chiropractic patient in Montreal.

In summary, the coroner's report found a link between the patient's cervical adjustment on February 20, 2006, and the dissection of her vertebral artery leading to CVA and her death in hospital on February 22, 2006. The full report makes 15 recommendations which address the chiropractic, physiotherapy and medical professions in Canada.

The April 12, 2007 story from Canada's CBC News Service, is online at <http://www.cbc.ca/canada/montreal/story/2007/04/12/qc-chiropracticreport20071012.html>.

Media Attention

Although this case has not yet received media coverage here in the United States, it is possible it could gain some attention. ACA has been in close contact with the Canadian Chiropractic Association regarding this matter, and we are prepared to respond to any publicity this case may receive. **If you receive a call from a journalist on this matter, please refer them to ACA's Communications Department.** The department's Director of Public & Media Relations, Angela Kargus, can be reached at 703-253-1676.

It is important that media receive factual, accurate information. Association representatives are in the best position to answer a journalist's questions on this case.

Patient Communications

Patients, staff and colleagues may ask you about the case if it receives media coverage. The ACA offers several pieces of information for its members, including:

Healthy Living Fact Sheet: Is Chiropractic Safe?

(www.acatoday.org/pdf/jacaonline/Jan07/107Philo.pdf)

Chiropractic & Stroke: Key Messages

(http://www.acatoday.org/membersonly/CVA_Key_Messages.pdf)

What are the Risks of Chiropractic Neck Adjustments?

(http://www.acatoday.org/membersonly/ChiroRisks_Lauretti_06.pdf)

ACA Wants to Know if You Have Had Problems with Triad Healthcare

The ACA has received an increasing number of complaints regarding the chiropractic network, Triad Healthcare, Inc. If your office has experienced problems as well, please email us your concerns at insinfo@acatoday.org or fax them to 866-575-8615 ASAP. These examples are helpful to our investigation.

ACA Unveils New Web Pages Dedicated to the Quality Movement

ACA has recently developed several new Web pages related to the quality movement. The ACA HOD appropriated \$150,000 from the ACA emergency fund to implement a six-month strategy to ensure the chiropractic profession is represented in this policy area. To learn more about the overall health community picture, and to access Web pages dedicated to CMS' new Physician Quality Reporting Initiative and how it affects chiropractic as well as NCQA's Back Pain Recognition Program, please visit http://www.acatoday.org/content_css.cfm?CID=2296.

REMINDER: Apply for your National Provider Identifier!

All health plans (including Medicare, Medicaid and private health plans) and all health care clearinghouses must accept and use NPIs in standard transactions by May 23, 2007 (small health plans have until May 23, 2008). Read more and apply today at http://www.acatoday.com/content_css.cfm?CID=1267.



ICA *Report*

By Eric Huntington, DC
ICA Maryland Delegate

ICA Outlines Legislative Goals for the New US Congress

With the significant shift in the national political equation in the United States brought about by the election of Democratic majorities in both the US House and Senate, new opportunities may have opened up for the chiropractic profession in federal legislation. "Under the previous equation, where the White House and both Houses of Congress were in the hands of the same party, room for bargaining was very limited, especially since the Administration's wishes on key issues tended to dominate most if not all legislative outcomes," said Dr. Michael McLean, co-chair of the International Chiropractors Association (ICA) Legislative Committee. "In the new Congress, we need to act swiftly to identify our goals and mobilize our allies to promote a sound and realistic legislative agenda for the profession," said McLean.

Acting in response to a detailed analysis of chiropractic's legislative prospects and priorities prepared by the ICA Legislative Committee, ICA'S Board of Directors has embraced a series of legislative goals to be promoted in the new session of the US Congress that convened in January 2007.

Included in the list of goals for the chiropractic profession are initiatives that are designed to be realistic, of practical as well as symbolic value to the profession and worthy of profession-wide support. Those priorities are:

- The introduction and passage by both House of Congress of a "Sense of Congress" resolution calling for the implementation of statutory authority already in place to commission doctors of chiropractic as health care officers in the US Armed Forces. Legislation was passed in 1992 to authorize the Secretary of Defense to commission DCs, but that authority has never been implemented.
- The introduction and passage of legislation establishing a permanent chiropractic benefit in the federal TRICARE program for military dependents and retirees.
- The introduction and passage of legislation providing for better access for veterans to chiropractic care, establishing direct access to chiropractic services, without medical referral. Rep. Bob Filner of California had introduced such legislation in the 109th Congress, HR 917, and ICA believes it must remain a key priority in the new Congress.

- The introduction and passage of legislation requiring the US Department of Veterans Affairs to provide chiropractic access at all facilities, based on HR 5202, introduced in the 109th Congress by Rep. Jeb Bradley and Rep. Bob Filner.
- The introduction and passage of Medicare reform legislation that would require that chiropractic examinations and x-rays be paid for, and that would clearly establish that Chiropractic services under Medicare may only be furnished by a doctor of chiropractic. ICA's proposed initiative would further establish the unique service of the "chiropractic adjustment by amending the law identifying those chiropractic services authorized for reimbursement to read, "...chiropractic adjustment or manual manipulation of the spine to correct a subluxation." The current law only specifies "manual manipulation" which has widely been interpreted as a generic procedure which might be applied by a wide range of providers.

In the new Congress, the chiropractic profession will be facing the traditional battle for scarce federal funds, a struggle complicated by the massive new spending generated by the Medicare prescription drug benefit, revenue deficits and a crushing national debt. ICA is determined, however, to educate policy makers on the stark contrast between the Medicare drug spending issue and the importance of expanding access for all federal beneficiaries to the cost-effective, natural care choice available through chiropractic.

"Doctors of chiropractic must be clear and emphatic in our communications with our Congressional representatives on behalf of our patients, our profession and our nation," said ICA Legislative Committee Co-Chairman Dr. Michael McLean. "We need to stress that chiropractic, as a drugless, clinically and cost-effective approach to health and healing, can contribute significantly to the solution not only of the Medicare problem, but to other federal programs as well. This can only happen, however, if beneficiaries are not driven away from our care to second-choice, much more expensive medical specialty care, by unsound public policies."

ICA looks forward to continued legislative cooperation with the member organizations of the Chiropractic Coalition and hopes that all organizations in the profession will recognize the need for cooperative action on a reasonable agenda.

ICA also urges every doctor of chiropractic, chiropractic office staff member, chiropractic student, and concerned patient to be in regular contact with their US Congressional representatives on issues of concern to the profession and to act with

determination to promote a sound national health policy, one that takes advantage of the unique and powerful benefits only chiropractic can provide. "It is vitally important that DCs know their federal legislators, and make a serious effort to educate them on the nature, and especially the safety, drugless aspects and cost-saving potential of chiropractic," said Dr. McLean. "Ideally, DCs should seek to provide opportunities for legislators to experience chiropractic personally as patients, thus equipping them with the best understanding of what chiropractic is all about.

CMS FORM 1500 ERRORS FORCE IMPLEMENTATION DELAY

On March 9, 2007, the Centers for Medicare and Medicaid Services CMS announced that certain print vendors, specifically the Government Printing Office (GPO), are selling incorrectly formatted versions of the revised form. The National Uniform Claim Committee (NUCC) revised the CMS-1500 (12-90) last July to accommodate the NPI. Medicare announced in September 2006 that beginning April 1, 2007, it would accept only the new form, CMS-1500 (08-05). If a provider has obtained updated CMS-1500 forms from the GPO or other vendors offering a similar form to accommodate the National Provider Identifier (NPI), the forms may not be valid.

According to the official CMS press release, "After reviewing the situation, the GPO has determined that the source files they received from the NUCC's authorized forms designer were improperly formatted. This resulted in the sale of both printed forms and negatives which do not comply with the form specifications."

In recognition of this massive potential snag, CMS has announced that they will extend the CMS-1500 (12-90) version acceptance period beyond the original April 1, 2007 deadline while the situation is resolved. "Medicare contractors will be directed to continue to accept the Form CMS-1500 (12-90) until notified by CMS to cease," CMS said, estimating a target date

of June 1, 2007.

CMS is directing contractors to return any CMS-1500 (08-05) forms they receive that are not printed to specification. For more information on identifying correct and incorrect forms, visit: www.cms.hhs.gov/ElectronicBillingEDITrans/Downloads/1500%20problems.pdf or contact Brian Reitz at Brian.Reitz@cms.hhs.gov.

The CMS website, http://www.cms.hhs.gov/ElectronicBillingEDITrans/16_1500.asp, provides the following description of the Form 1500 and its intended use: "The National Uniform Claim Committee (NUCC) is responsible for the maintenance of the CMS-1500 form. CMS does not provide the form to providers for claim submission. In order to purchase claim forms, you should contact the U.S. Government Printing Office at (202) 512-1800, local printing companies in your area, and/or office

continued on page 12

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<http://www.nutriwest.com/distrib/index.htm>

ICA Report

continued from page 11

supply stores. Each of these sources sells the CMS-1500 claim form in its various configurations (single part, multi-part, continuous feed, laser, etc).

The only acceptable claim forms are those printed in Flint OCR Red, J6983, (or exact match) ink. Although a copy of the CMS-1500 form can be downloaded, copies of the form cannot be used for submission of claims, since your copy may not accurately replicate the scale and OCR color of the form. The majority of paper claims sent to Medicare contractors are

scanned using Optical Character Recognition (OCR) technology. This scanning technology allows for the data contents contained on the form to be read while the actual form fields, headings, and lines remain invisible to the scanner. Photocopies cannot be scanned and therefore are not accepted by Medicare contractors."

ICA's Medicare Committee will continue to monitor this and other developments and keep the membership fully informed.

Thanks to MCA Supporters

MCA has a Supporting Membership category for suppliers of goods and services. We encourage you to consider the following 2007 Supporting Members when making purchases. Support those that support **YOU!**

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Plymouth Bell Laboratories

Marc Cienkowski
215-646-8316

Have YOU Been Receiving MCA Update?

The Maryland Chiropractic Association has been distributing *MCA Update*, the association's e-mail newsletter for well over a year. Have you been receiving a copy in your email? If you did not receive *MCA Update* in your email during February, please call MCA headquarters at 410-625-1155 to confirm that we have your correct email address on file.

The *MCA Update* is distributed to members the first week of every even month (February, April, June, August, October, and December) so members can stay abreast of the latest news concerning legislative action, MCA's education offerings, etc. during months when the *MCA Journal* is not mailed.

In addition to providing members with the most up-to-date information, one of the added benefits of monthly coverage is allowing for monthly classifieds for those chiropractors who may have an unexpected staff shortage.



Looking for Jurisprudence CE?

MCA's convenient Jurisprudence CE Course makes it easy for you to get this credit hour in your own time and on your own schedule.

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Sign up for the MCA Jurisprudence CE course, and you will be sent the course materials via mail. Study the materials, stop by our headquarters, and take the test on your own time. It's that easy!

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Registration materials are available online at www.marylandchiro.com/jurisprudencece.htm.

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You Can Talk the Talk, But Can You Walk the Arthritis Walk?

By Dr. Adam Fidel, MCA Public Relation Chair

The MCA is sponsoring the 2007 Arthritis Walk that will be taking place in several different locations through Maryland (all 8 locations are listed below). This should be the biggest outside public relations event in the history of the MCA.

However, I still need doctors for the event in the following locations: Westminster, Greenbelt, and Bethesda.

We are able to have a booth or a tent at each event to provide information about chiropractic. I hope to have many offices participate in each event and have a large group of people walking in the **Arthritis Walk** hopefully wearing a Chiropractic t-shirt.

I would like to have one doctor coordinate each event. Many

offices can participate and this will be a big event for chiropractic as well. I think each office can turn this fundraiser for the Arthritis Foundation into a great opportunity to educate your patients and **generate new patients** through various in office activities such as:

- Drives to find walkers to participate
- A lecture on Arthritis & Chiropractic in/out of the office
- Office PR for your local paper about your participation.
- Have an office patient appreciation day before to promote your walking.
- Put the info on your Web site
- E-mail to your patients

If you are interested in coordinating the event in your County please contact me directly @ 410-484-5642 or 410-917-2282 (cell) or email to: Fidelchiropractic@comcast.net.

IMPORTANT NOTES

For additional info, to receive a team kit contact, to receive registration brochures, and promotional posters please contact the Arthritis Foundation's Beth Farrall at 410-654-6570, ext. 230 or bfarrall@arthritis.org.

* We are all going to walk as a Team called: Maryland Chiropractic Association. If you register independently, please use this team name and all the funds raised will be tracked and grouped together. This will be important in getting MCA listed as a major contributor.

* Talk up the walk to your patients and friends.

* You may want to buy T-shirts with your office name on it for your participants.

* There will be a table at the event sponsored by MCA for you to communicate with patients.

2007 Arthritis Walk Locations

1) Howard County, MD

Date: Saturday, May 5, 2007
Time: Registration - 11 a.m., Walk - noon
Location: Meadowbrook Park, 5001 Meadowbrook Lane, Ellicott City, MD 21043
Walk Distance: 3 miles or 1 mile

2) Bethesda, MD

Date: May 19, 2007
Register Online:
<http://montgomerycountyarthritiswalk.kintera.org>

3) Hagerstown, MD

Date: Saturday, May 19, 2007
Time: Registration - 9 a.m., Walk - 10 a.m.
Location: Fairgrounds Park, 351 North Cleveland Avenue, Hagerstown, MD 21740
Walk Distance: 3 miles or 1 miles

4) Harford County, MD

Proud Partnership with Upper Chesapeake Health's Joint Center @ Harford Memorial Hospital
Date: Saturday, May 19, 2007
Time: Registration - 9 a.m., Walk - 10 a.m.
Location: Ripken Stadium, 873 Long Drive, Aberdeen, MD 21001
Walk Distance: 3 miles or 1 mile

5) Westminster, MD

Date: Saturday, May 12, 2007
Time: Registration - 11 a.m., Walk - noon
Location: Carroll County Farm Museum, 500 South Center Drive, Westminster, MD 21157
Walk Distance: 3 miles or 1 mile through the Carroll County Farm Museum or 3 miles through the streets of Westminster

6) Baltimore, MD

Proud Partnership with GBMC's Joint & Spine Center
Date: Sunday, May 20, 2007
Time: Registration - 10 a.m., Walk - 11 a.m.
Location: Towson University (Burdick Field), 8000 York Road, Baltimore, MD 21252
Walk Distance: 3 miles or 1 mile

7) Greenbelt, MD

Date: May 5, 2007
Register Online: <http://pgcountyarthritiswalk.kintera.org>

8) Annapolis, MD

Date: Saturday, May 12, 2007
Time: Registration - 8 a.m., Walk - 9 a.m.
Location: Quiet Waters Park, Annapolis, MD
Walk Distance: 1K, 3K or 5K

Want to Generate Some Buzz For Your Practice?

*MCA Offering Publicity Materials to Members
In Order to Generate Local Media Exposure!*

Enhancing MCA membership even more, the MCA has recently added several press releases that MCA members can download, tailor to their specific practice, and send to their local media outlets.

These releases can be downloaded from the Members Area of the MCA Web site at www.marylandchiro.com/members/PR.

These health-oriented releases touch on a variety of topics ranging from winter shoveling tips, safety concerns raised by wheeled shoes, to tips on improving your golf game while also saving your back. All are stories that your local weekly or daily newspaper may be interested in publishing.



This is a great way to promote your name and practice within your local community! This is also a great opportunity to establish yourself as a source on health topics that local reporters can go to regarding future stories.

Currently, there are seven releases available, divided into three news angles: winter, spring, youth. Additional stories and news angles will continue to be added to this page from time to time.

If you should have any questions, regarding these releases, please

contact Molly Baldwin at 410-625-1155 or mollybaldwin@assnhqtrs.com.

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Classifieds

To place a classified ad in the MCA Journal, please send it in writing, along with appropriate payment, to MCA, 720 Light St., Baltimore, MD 21230. The cost for a 25-word ad is \$15 for MCA members (2 issues for \$25) or \$25 per issue for non-members. The next issue is set for distribution on July 1, 2007. The deadline for classifieds is June 15.

Associate Wanted — Busy practice in Howard County. Maryland license with PT privileges. Good manual adjusting skills. Salary plus bonus. Fax resume to 410-313-9755 or email jrsfink@aol.com. (5/07)

Associate Wanted — Chiropractic clinic is expanding its growing practice with a new location south of the existing one in Gambrills, MD. High energy and motivated associate wanted to grow and prosper in the practice. We offer a competitive salary, an attractive bonus package, and full benefits. Rare and lucrative opportunity. PT privileges a plus but not necessary. Please send a cover letter and resume to Adam Santavicca, CBay Advisory Group at adam@cbayadvisory.com. (5/07)

Associate Wanted — Established family practice in Bowie looking for a professional and motivated chiropractor with PT privileges to join our great chiropractic team. Salary + bonus, benefits available. Fax resume to 301-352-0893. (5/07)

Associate Wanted — Associate wanted for busy family practice in Towson and Federal Hill (Baltimore). Salary, benefits and bonus. Great working environment. Call: 410-321-7210. (5/07)

Associate Wanted — FT and PT positions. Long term, with growth opportunity, if desired. Approx. 12-18 hours/week if P/T. Must have integrity and compassion with excellent clinical & communication skills. Fax resume to 301-858-1608 or call 443-694-3187. Crofton. (5/07)

Associate Wanted — FT chiropractor needed in Columbia. Great Pay + Bonus. Health insurance and malpractice paid for. Fax resume to 410-884-6820 (11/07)

Associate Wanted — Great opportunity in Ocean City, Maryland. Join a very active practice of 20 years with terrific staff support. Maryland licensed DC with PT privileges. Good base salary plus percentage and benefits. Possibility of future partnership. Email curriculum vitae to jheinlen@occhiropractic.com. (5/07)

Associates Wanted — FT and PT, long term, with growth opportunity, if desired. Approx. 12-18 hours/wk if PT. Must have integrity and compassion with excellent clinical and communication skills. Fax resume to 301-858-1608 or call 443-694-3187. (7/07)

Chiropractic Assistant Wanted — Baltimore County /Parkville-Carney area. Full or part time. Salary plus benefits. Call 410-484-6718 or fax resume to 410-602-5088. (5/07)

Office Coverage — Licensed, experienced and insured DC with PT privileges. Please contact at 410-901-2903 or dredachiro@bcctv.net. (5/07)

Office Coverage — Leave your patients in the Best of Hands. MCA Members get 25% Discount. Over 21 yrs. exp; **Will travel. Reputable. Reliable. Personable. References. Call Giuseppe Nunnari ***"Dr. Joe"*** Cell: 240-731-0264 or Email: drjoe.dc@verizon.net. (5/07)

Office Coverage — Vacation coverage sought for Baltimore practices. Please contact 717-495-1146. Ask for Dale. (5/07)

Office Space Available — Fully equipped chiropractic office with PT and x-ray equipment in Arnold, MD available to share space. Please call 410-353-7626 if interested. (5/07)

Practice for Sale - Montgomery County - Growing practice with large active patient census, strong new patient volume. Sizable revenue increase since addition of DRX9000. Paragon Group (800) 582-1812 www.eparagongroup.com. (5/07)

Practice for Sale - Washington County - Long-established family practice with sizable patient census, steady new patient volume. Well trained, tenured staff. Paragon Group (800) 582-1812 www.eparagongroup.com. (5/07)

Practice for Sale - Prince George's County - Quality practice with excellent reputation in desirable area. High-traffic shopping center location. Financing available to qualified borrower. Paragon Group (800) 582-1812 www.eparagongroup.com. (5/07)

Practice for Sale - Anne Arundel County. Easy access to I-97. Established five plus years, growing and well equipped office. Call 410-206-7369 for more information. (5/07)

Equipment for Sale - Lloyd Astro Stationary Adjusting Table. Purchased new in 1992 - still in excellent condition. Present cost new - \$1,350 + shipping. Your cost - \$700. Contact Dr. LeVan @ 301-585-5350. (7/07)

Services Available - Catch the Decompression Wave; Looking to add decompression to your existing practice, or start a Spinal Decompression Center. We need the right doctors/partners. Call Brian Sorrentino, CEO Syndication 202-467-2788. (5/07)