

MCA Journal



Outgoing MCA President Dr. Paul Henry (left) presents Dr. Brian Morrison with MCA's 2005 Maryland Chiropractor of the Year Award during the Association's recent convention held in Baltimore.

2005 MCA Convention a Weekend of Education, Comraderie and Honors

The Maryland Chiropractic Association (MCA) was back in Baltimore for its 2005 Convention & CE Forum during the weekend of October 22-23. Introducing a streamlined schedule, the event also featured several newsworthy items for Maryland's chiropractic community including the induction of the association's new leadership as well as the revelation of the MCA's 2005 Awards winners.

Dr. Brian Morrison, a chiropractor in private practice in Ellicott City, led an impressive list of individuals honored with MCA's 2005 Awards. Morrison, was named **2005 Maryland Chiropractor of the Year** in recognition of his efforts to gain legislative support for the development of an improved CE regulatory process.

Dr. Paul Ettlinger of Health Quest Chiropractic & Physical Therapy in Owings Mills and **Dr. Neil Cohen** of Comprehensive Spine & Sports, both were honored

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Welcome New Members

ACTIVE MEMBERS

Mark Alexander, D.C.
Catonsville, Md.

Ryan Cappelletti, P.A., D.C.
Bel Air, Md.

Jess Hunley Crawford, III, D.C.
Waldorf, Md.

Kathryn A. Hodges, D.C.
Hodges Chiropractic
Queenstown, Md.

David Holt, D.C.
Ashburn, Va.

Michael Liebling, D.C.
Elkridge, Md.

Edwin Lipsitz, D.C.
Lipsitz Chiropractic
York, Pa.

Kevin M. McKenzie, D.C.
Cumberland, Md.

Mariella M. Young, D.C.
Rockville, Md.

CHIROPRACTIC ASSISTANT MEMBERS

Cheri Chenoweth
Adolph Family Chiropractic
Baltimore, Md.

Ambre Coale
Adolph Family Chiropractic
Baltimore, Md.

Jennifer L. Michie
Whole Health Chiropractic
Annapolis, Md.

STUDENT MEMBER

Jeremy Busch
Lombard, Ill.

SUPPORTING MEMBER

Laurie Dengel
Metro Marketing
Howell, N.J.

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President's Update

Donald Hirsh, DC

Texas-Sized Boots to Fill



After 16 years of serving on the MCA Board of Directors I am finally getting the humbling opportunity to serve as your president. As luck would have it, I got to follow Dr. Paul Henry. It's like having to do a violin solo on stage following the Rolling Stones. Paul, I've been watching MCA presidents serve for 18 years and you have reset the bar. Congratulations on a job well done. But did you have to be soooo good?

This next year will, however be made easier by a great leadership team. Drs. Rick Schmidt and John DeMaio will serve as first and second vice presidents respectively. Dr. Dan Wise returns as treasurer and Dr. Howard Lewis returns as secretary. We also have a great lineup of new and returning district reps (see the box on page ? with the list of all current MCA officers). We will need a great team to face the challenges of the next twelve months. A great emphasis will be placed on reversing the CareFirst pediatric decision. Please follow this story closely and be ready to help. As always, we will make the voice of chiropractic heard in Annapolis during the 2006 legislative session. This year we will be assisted by the top lobbying firm in Annapolis, Alexander and Cleaver. We expect our strongest legislative session ever this year.

While I look ahead to the coming year, I plan to concentrate a tremendous amount of energy and thought on how we can connect better with each one of our members. We want the MCA to be viewed as a much broader resource rather than solely as a source of CE credits and legislative efforts. To that end, we are forming a women's forum with CE credits, networking and social sessions to enrich the life of our growing population of female colleagues. Also, we are forming a business forum to enhance the entrepreneurial aspects of our professional lives. Look forward to special sessions between and at each convention that focus on the business aspect of our practices. We have many more ideas to share with you. Stay tuned. Likewise, please share any of your ideas, big or small with me. I will be readily accessible to all members during my tenure. That is a promise.

Lastly, it was great seeing many of you at our annual convention. We had excellent speakers and fellowship. We look forward to seeing you at many more of our CE programs and at next year's convention in Ocean City.

Sincerely,

Donald W. Hirsh, DC



TOP LEFT: Outgoing MCA President Dr. Paul Henry (left) passes on MCA leadership to Dr. Donald Hirsh (right). Hirsh has served on MCA's Board of Directors for 16 years



TOP RIGHT: Outgoing MCA President Dr. Paul Henry (left) presents Dr. Howard Lewis (center) with the Frank Roberts Memorial Award. Joining Paul and Howard is Frank's son, Mark Roberts (right). Lewis, of Lewis Chiropractic Center in Fallston, received the award in recognition of his long term and dedicated service to MCA and the chiropractic profession.



BOTTOM RIGHT: Outgoing MCA President Dr. Paul Henry (left) presents Dr. Paul Ettlinger with MCA's President's Award for his diligent work on a variety of insurance issues the profession has faced over the past year.

2005 MCA Convention

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with the **President's Award**. Ettlinger was recognized for his diligent work on a variety of insurance issues the profession has faced over the past year, while Cohen received his award in honor of his work in the legislative arena raising funds to support candidates favorable to chiropractic.

Dr. Howard Lewis was also honored, receiving the **Frank Roberts Memorial Award**. Lewis, of Lewis Chiropractic Center in Fallston, received the award in recognition of his long term and dedicated service to MCA and the chiropractic profession. MCA bestowed its Aaron Barad Legislative Awards upon **Jim Vallone**, executive director of the Maryland Board of Chiropractic Examiners, recognizing his leadership in helping the board advance the chiropractic profession in Maryland.

MCA also elected and installed new officers during the Convention. **Dr. Donald Hirsh**, a chiropractor in private practice in Laurel, succeeds **Dr. Paul Henry** of Dundalk as

president of the association.

In addition to Dr. Hirsh, MCA members also elected **Dr. Richard Schmitt** of Bowie to serve as 1st vice president. Elected as 2nd vice president was **Dr. John DeMaio** of Gambrills.

Dr. Eric Jones of Hagerstown was elected to serve on the MCA Board of Directors as a representative for the Western Region. MCA members also elected **Dr. Robert Poane** of Bel Air and **Dr. Paul Ettlinger** of Owings Mills, as North East Region representatives.

Elected to the Board as Central Region representatives were **Dr. Nicole Ganz** of Kensington and **Dr. Ronda Sharman** of Upper Marlboro. Completing the slate of new leaders is **Dr. Adam Brenner** of Glen Burnie, elected as representative for the association's Southern Region.

Some Important Info on Health Insurance Contracts

Joel Kruh, MCA Legislative Liaison

Maryland Workers Compensation Commission Withdraws Guide of Medical and Surgical Fees Regulations

On September 26, 2005, Maryland's Workers Compensation Commission (WCC) withdrew regulations amending the guide of medical and surgical fees – regulations that were opposed by the Maryland Chiropractic Association (MCA).

The following comments were submitted to the WCC by MedChi, the Maryland Health Care Commission, and the MCA in opposition to the proposed regulations:

“Our organization would like to register their concern about the apparent ongoing effort to develop regulations that dramatically alter the historic protections of Maryland's workers compensation system. In March of this year, we communicated our extreme concern about a set of proposed regulations that was distributed which would have, among other things, eliminated a worker's right to select the provider of their choice. It was determined that those regulations exceeded statutory authority and thankfully, they were not advanced.

Earlier this summer, a second set of regulations was circulated unofficially that if advanced, would also have greatly undermined the historic protections for Maryland's injured workers. While we understand that those regulations were only draft and that you did not intend to advance them in the form we received, they raised significant concerns for our members. This concern arises in large part because the regulations reflected a continued effort on the part of the Commission to develop regulations which will substantially alter Maryland's protection for injured workers.

The members of our organizations find this ongoing effort by the Commission to be particularly perplexing given that Maryland's workers compensation system is considered one of the most cost effective systems in the country. At a June 8 seminar held in Baltimore, the National Council on Compensation Insurance, Inc. (NCCI), provided a comprehensive presentation on Maryland's workers compensation system and its relative position on various indices as compared to other states in the country. For instance, out of 46 states, Maryland has

the fourth lowest actual average medical benefits per employee per year. Maryland's medical loss ratios have stabilized and its indemnity loss ratios have decreased. NCCI's data shows that Maryland's cost of insurance is 15% below average. Consequently, our organizations are at a loss to find a justification for the aggressive restructuring that has been reflected in the two sets of proposed regulations that have been circulated.

The only systematic deficiency that we are aware of at this time is a growing access issue for orthopedic services. When the Commission restructured the workers compensation fee schedule (an effort supported by our organizations) an unintended result of that restructuring was a dramatic reduction in fees for orthopedic surgical procedures. As a result, many of Maryland's most respected orthopedic surgeons are no longer accepting workers compensation or limiting the number of cases they will accept. While the restructured fee schedule and methodology are more rational and provide a basis for regular updates, the orthopedic surgical fee anomaly demands special attention. NCCI data indicates that surgical treatments (not just orthopedic) represent only 3.6% of workers compensation medical payments. Therefore, adjusting the orthopedic fees to assure adequate access for injured workers will not have a significant impact on the overall cost of medical payments in the state.

Our organizations wish to work as partners with the Commission to ensure that injured workers have adequate access to the health care services that require to facilitate their return to work as quickly and effectively as possible. We also appreciate that the economics of the system is a component that cannot be disregarded. Our concern is that economics and the interests of workers compensation insurance carriers seem to have co-opted the primary objective of protecting and serving the injured worker. We hope our members' concerns will register with the Commission and that any future effort to amend by regulation affected stakeholders – workers, providers, employers and insurers.

These regulations will have the effect of limiting injured workers' access to care in many ways, including:

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NCMIC Ad

ACA Update

By Audie Klingler, DC - ACA Maryland Delegate

ACA Aggressively Pursues Chiropractic Network Problems

The American Chiropractic Association (ACA) continues to aggressively pursue on multiple fronts its campaign against certain chiropractic managed care networks. Based on recent correspondence, it appears that some of the networks in question are beginning to take notice.

American Specialty Health

In a recent letter to at least one insurance company, American Specialty Health (ASH) Chief Operations Officer Robert White refutes statements from a recent ACA press release and insists, “ASH does not engage in any wrongful practices regarding patient care or reimbursement.” The letter also invokes the name of ASH’s vice president of governmental affairs, a two-time past president of the ACA, and states that he has “routinely engaged the ACA over the last six years on behalf of ASH, but unfortunately ACA is choosing a track that is based upon false assumptions and accusations.” The letter goes on to claim a high satisfaction rating among chiropractors in their program and that each chiropractor “has voluntarily chosen to participate” in their networks.

“Mr. White conveniently ignores the fact that there is a groundswell of displeasure among chiropractors nationwide with the policies and procedures of ASH – and we have received hundreds of written complaints to prove it,” commented ACA Executive Vice President Kevin Corcoran, CAE. “Technically, participation is ‘voluntary;’ in reality, doctors feel they have no choice. They can either participate and receive at least a pittance in reimbursement – or opt out and receive absolutely nothing.” ACA President Richard Brassard, DC, added that a recurring tactic of ASH is to attempt to associate the company with a former ACA president to “confuse chiropractors and lure them into believing that ACA condones ASH practices.” “This tactic is, in our opinion, distasteful and highly misleading,” added Dr. Brassard. “The only ‘engagement’ they have had with the ACA is in the form of shallow handshakes and photo ops – not serious discussion and problem solving. Our legal team has made it clear that when ASH is ready to really talk, we will sit down and discuss the possible settlement of these issues.”

American Chiropractic Network

The ACA has also written a strongly worded letter to American Chiropractic Network (ACN) CEO Thomas J. Allenburg, DC, requesting that ACN place an immediate moratorium on further terminations under its “professional improvement program” and reinstate those doctors who have already been terminated. ACA’s letter came in response to a letter from Dr. Allenburg contending that ACA’s concerns “result from miscommunication regarding and misunderstanding of our operations.”

Both letters resulted from a July 27 meeting between

ACA and ACN officials that did not alleviate ACA’s concerns about the network’s abusive policies. In a follow-up letter, ACN asked ACA to reveal the names of doctors who had responded to ACA’s data collection campaign and to provide specific details about those complaints. The ACA refused, stating privacy concerns and doctors’ fears of retaliation by ACN. “The reality we see is a profession in which many fine and capable doctors have been excluded from participation in your program because they cannot or will not comply with the overly restrictive policies and limitations that affect quality health care,” George McClelland, DC, ACA’s immediate past chairman, responded in the Sept. 6 letter. “We also see many doctors practicing under the threat of termination. Doctors are struggling to maintain their practice and their livelihood and at the same time provide quality healthcare to their patients despite limitations placed upon them by ACN. . . I don’t believe you understand the degree of fear and misapprehension your policies have caused. Doctors are fearful of losing their practices and their livelihood and therefore are extremely reluctant to have their names revealed to your organization. Therefore, unfortunately, you were not able to dispel our concerns. Rather, our concerns are heightened with every call we receive or complaint we obtain.”

For more information on ACA’s continuing efforts with the chiropractic managed care networks, visit the Chiropractic Networks Action Center (<http://www.acatoday.com/networks/index.shtml>).

ACA Annual Meeting Features Election of New Leadership

New leaders took the helm during the annual meeting, succeeding officers whose terms had expired. Dr. Richard Brassard, president of Texas Chiropractic College, was elected president of the ACA, and Dr. Lewis Bazakos, of Valley Stream, N.Y., current Governor of District 4, was elected chairman of the board of governors. Dr. Brassard succeeds outgoing president Dr. Donald Krippendorf, of St. Petersburg, Fla., who will remain on the Board of Governors as immediate past president. Dr. Bazakos succeeds outgoing chairman Dr. George McClelland, who stepped down after 25 years of service to the House of Delegates.

“I am a second generation chiropractor, and I’m pleased to now be a second generation president of the American Chiropractic Association,” commented Dr. Brassard, whose father, Dr. Gerald M. Brassard, served as ACA president in 1970. “You honor me greatly, perhaps more so than you think or realize.” Dr. Brassard added that he has been pleased to see researchers, educators and association leaders working together in recent years to benefit the profession – and he hopes to help continue that trend.

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All New
Formula!

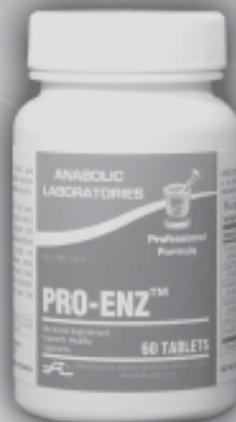
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Eye on Annapolis

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- (a) the requirement that an “application” for a health care fee that differs from the existing Medical Fee Guide be “approved [by the Commission] prior to the date [health care] treatment is rendered”;
- (b) because insurers are not permitted to compensate a health care provider who is not “registered,” it will be less likely that an injured worker will be able to seek care from a primary care provider;
- (c) health care providers such as pharmacists or emergency room providers may not be registered which may cause delays and other difficulties for injured workers seeking care;
- (d) the claims adjusters, who will interpret these regulations, will be free to deny payment to any health care provider they prefer; thereby presuming the power to deny the injured worker choice or any preference of health care provider;
- (e) access to a specialized provider for critical care, unusual circumstances or expert medical opinion may be precluded or significantly delayed pending the Commission’s approval of an agreement or a timely update of the WCC registration list of authorized health care providers.

CONCLUSION

MWHCA members are concerned that the proposed regulations would sanction unreasonable delay, restrictions and impediments. Such disruptions will have an adverse, unfair impact on the compensation due to workplace health care providers as well as the injured worker’s access to appropriate health care. Notwithstanding any assurance from the Commission to the contrary, reliable safeguards to preclude such abuses and denials are non-existent.

Please accept these written comments in the spirit with which they are presented – to support appropriate quality health care for injured workers in a timely manner. The members of the Maryland Workplace Health Care Association, Inc. (MWHCA) sincerely believe that the quality of health care for injured workers should always be our “primary goal” and never be compromised to further any other objective regardless of how compelling. While our members are supportive of efforts that improve health care for injured workers, any significant changes such as the proposed regulations must never threaten our ability to serve the primary goal.

The reason stated by the Commission for the introduction of these regulations was the desire to address a admitted access to care concerns created by the Commission’s 2004 regulations,

which revised the Medical Fee Guide using a Resource Based Relative Value System (RBRVS) using a “cost neutral,” single multiplier. It is our position that the proposed regulations, rather than correcting the Commission’s error, will significantly exacerbate the problems related to access to care concerns.”

After carefully reviewing the proposed regulations for the Maryland Medical Fee Guide, the MWHCA members reached the unanimous conclusion that the Commission will jeopardize the primary goal if it were to enact the proposed regulation. We sincerely hope that these comments, as well as those you may receive from other interested parties will dissuade the Commission from implementing the proposed changes.

MCA Member Chiropractor in Final Stages of Securing Hospital Privileges

MCA is pleased to announce that one of its members is in the final stages of securing hospital privileges at Calvert Memorial Hospital in southern Maryland. The following is a good template for hospital privileges for chiropractors:

PRIVILEGES

Privileges for chiropractic staff in the Department of Orthopedic Surgery are granted for both clinical areas and for specific procedures. All practitioners will undergo the same application process. Chiropractic staff, as allied health professional (AHP) are members of the professional staff of the hospital assigned to clinical departments. (Article IV, CMH Medical Staff Bylaws). To be eligible to request chiropractic staff clinical privileges, the following minimum threshold criteria must be met:

INITIAL APPOINTMENT REQUIREMENTS

Minimum Formal Training: Successful completion of an approved chiropractic training program with the fulfillment or qualification of board certification within the requirements of the applicant’s American Specialty Board. Licensed by the Maryland State Board of Chiropractic Examiners to practice chiropractic or to practice chiropractic with the right to practice physical therapy.

Required Previous Experience: The successful applicant must be able to demonstrate provision of chiropractic services for patients during the past 24 months without significant quality variations identified or completion of a DC degree (Doctor of Chiropractic) at an U.S. CCE-accredited chiropractic college and establishment of chiropractic board qualification within the past six months.

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ICA *Report*

ICA Offers Testimony on State Physical Therapy Initiatives

In the past week, ICA has presented testimony on aggressive physical therapy scope expansion initiatives in Hawaii and Vermont, offering chiropractic's perspective on basic protection and professional competence issues. Among the key points made in ICA's statement was a strong expression of concern over the need for PTs to have the education necessary to perform the new services they are seeking to have authorized.

In the testimony on the Vermont PT initiative, ICA stated: *"The physical therapy organizations have adopted a nationwide strategy of promoting a standardized scope expansion language, along with extensive discussions on national models and educational and outcomes enhancements that do not necessarily relate to or correspond with the educational status and professional competence of physical therapy practitioners in Vermont. ICA believes that all policy makers charged with acting of this proposal take a very close and detailed look at the realities, vs. the assertions made by the physical therapy lobby effort, and act to provide the maximum protections for the citizens of your state."* Copies of ICA's testimony are available upon request via e-mail by contacting ICA at chiro@chiropractic.org.

ICA Issues Medicare Alert on Part D Marketing Efforts

The new Medicare Part D authorized by Congress to provide prescription drug benefits, will take effect on January 1, 2006. Starting this October, beneficiaries have been inundated with information about the specific plans available in their area. On November 15, beneficiaries can start enrolling in the Medicare drug plan of their choice. For coverage to begin on January 1, 2006, enrollment has to occur prior to December 31, 2005. If enrollment occurs after May 15, 2006, beneficiaries may be faced with increased monthly premiums.

ICA is urging all members to help educate Medicare beneficiaries in their practices to avoid being needlessly stampeded into managed care plans, and to avoid the many scams that are reportedly already operating, looking to victimize elderly patients. No Medicare beneficiary has to enroll in a managed care plan to obtain drug coverage. That option does exist, but it is not a requirement.

To access the new benefit, Medicare beneficiaries have two options:

- Keep standard Medicare with supplemental insurance and add only a drug benefit plan. (This drug plan is now known as Part D)
- Enroll in a privatized (Managed Care) Medicare Advantage plan that includes Medicare Parts A and B (doctor and hospitalization coverage) and a drug benefit.

Medicare beneficiaries do not have to enroll in Part D; participation is voluntary. If beneficiaries have good coverage elsewhere, they may not need it. No one can be excluded or charged higher premiums for health reasons or pre-existing conditions.

The Part D benefit is not free. It has been estimated that the average monthly premium in 2006 will be \$32.00. Plans also vary and there are many competing companies authorized to provide this benefit on Medicare's behalf. In the State of Michigan alone, 17 general plans and 9 managed care plans are marketing to consumers, creating great confusion and concern among senior citizens.

Additional information on the new drug benefit program can be obtained from the federal government on the official Medicare website at <http://www.medicare.gov/medicarereform/drugbenefit.asp> or from the American Association of Retired Persons (AARP) at 1-888-687-2277, or on-line at: http://assets.aarp.org/www.aarp.org/articles/health/medicare_d_full.pdf.

ICA Calls on State Chiropractic Licensing Boards to Help DCs Relocating from Katrina

ICA has called on all US state chiropractic licensing boards to use the full extent of their authority to assist doctors of chiropractic whose practices have been wiped out by the Hurricane Katrina disaster in obtaining temporary licenses so that they can re-establish their professional activities in new locations. In letters to all US state chiropractic licensing and regulatory boards, ICA President Dr. John K. Maltby told board members:

“As I’m sure you are aware many doctors of chiropractic have had their offices destroyed, or at least significantly damaged to the extent that they will be unable to open up for some time. In addition, the financial strain of being closed for an extended period may drive many of them out of business permanently. This will result in a shortage of chiropractic services even after the areas recover from this disaster.

The International Chiropractors Association (ICA) is requesting that every chiropractic state board initiate a program of temporary reciprocity for a one year period to allow displaced doctors of chiropractic to work as associates in facilities in other states. This will allow them to maintain some form of income and provide for their families while helping to ensure that they will be able to return to their home states and restart their practices in a year.”

First to act, recognizing the need to make extraordinary accommodations to serve and assist in this unprecedented disaster, the Governor of Virginia, The Hon. Mark Warner, has issued Executive Order 97, directing all possible assistance from his state for hurricane victims. Among the provisions of this order, was a section honoring ICA’s request. That provision states:

2. Authorization of the health regulatory boards within the Department of Health Professions to issue, under the direction of the Director of the Department and during the next 120 days, licenses, registrations, and certifications to practice in the Commonwealth, for a period not to exceed one year, to qualified health care practitioners who are displaced residents of Hurricane Katrina-affected states, who hold unrestricted licenses, registrations, or certifications in their resident states, and who may be unable to furnish or have furnished on their behalf complete documentation of their credentials and license status as otherwise required by Virginia law or regulation. The boards shall also have authority to defer the payment of licensing fees.

The Colorado Board of Chiropractic Examiners has also published an announcement of help to victims of Hurricane Katrina, stating: “We will provide a streamlined application process for those interested in relocating or working in Colorado within any of the professions or occupations licensed by our Division.” For more information on this important opportunity see the Colorado Board’s website at <http://www.dora.state.co.us/chiropractic/>.

ICA Works to Add “Doctor of Chiropractic” Category to Federal Emergency Volunteer System

ICA has acted to promote a change in the federal health care professionals’ volunteer pool organized by the US Department of Health and Human Services, Office of The Surgeon General and the Office of Public Health Emergency Preparedness. Many chiropractic organizations, including the ICA, have directed doctors of chiropractic interested in serving as an emergency volunteer to this federal clearing house, recognizing that there is no unique category for “doctor of chiropractic.” DCs have been encouraged to register under the “physician” category, and in the field for “specialty” to put “chiropractor”, thereby identifying their availability to provide chiropractic services.

ICA has written to Michael O. Leavitt, Secretary of the U.S. Department of Health and Human Services, requesting the addition of a specific “Doctor of Chiropractic” category in the federal volunteer pool system. In a letter dated September 9, 2005, ICA President Dr. John K. Maltby told the Secretary, “The experience of the past several years has shown the tremendous contribution chiropractic care can make to those involved in the disaster relief and recovery process. From the Pentagon and Ground Zero following the 9/11 tragedies, to the wildfires in the West, to the current hurricane disaster, chiropractors have freely given of their time and energies to assist those on the front lines, and have an important role to play. . It is appropriate to provide a specific category for the chiropractic profession in the federal volunteer clearinghouse system of the US Department of Health and Human Services, Office of The Surgeon General and the Office of Public Health Emergency Preparedness.”

ICA made a specific request that a chiropractic category be added: “In the present system, there is no specific category for doctors of chiropractic, and we request that the volunteer matrix be amended to include such a category. This would provide greater clarity for all concerned, and provide for a more effective mobilization of needed volunteers.” Dr. Maltby said in his letter on ICA’s behalf.

ICA has also shared its goal of a specific DC category in this important federal program with a number of key Members of Congress and has asked their help in persuading Secretary Leavitt to make this important change.

ACA Update

(Continued from page 6)

“It is an honor and a privilege to serve as ACA chairman,” said Dr. Bazakos. “I follow in the footsteps of some very special people who have served the ACA well. I pledge to work hard for the ACA and its members on the many challenges that face our profession. I thank the Board for its vote of confidence.”

Dr. Glenn Manceaux, of Houma, La., was elected vice president of the ACA and the third member of the executive committee.

Other members of ACA’s Board of Governors now include:

- *District 1:* Dr. William Pfeifer, Ketchikan, Alaska.
- *District 2:* Dr. Linda Zange, Chicago, Ill.
- *District 3:* Dr. Mario Spoto, Downingtown, Pa.
- *District 5:* Dr. John Gentile, Miami, Fla.
- *District 6:* Dr. Jerry Gerrard, Mesa, Ariz.
- *District 7:* Dr. Paul Smith, Las Vegas, Nev.
- *President of the Council of Delegates:* Dr. Rick McMichael, Canton, Ohio.
- *Vice President of the Council of Delegates:* Dr. Keith Overland, Norwalk, Conn.

In Council of Delegate elections, Drs. McMichael and Overland were elected as president and vice president respectively, and Dr. David Herd, of Geneva, N. Y., was reelected to his position as secretary.

In addition to Dr. McClelland, other outgoing Board members include: Dr. James Edwards, former chairman of the board and Kansas delegate; Dr. Daryl Wills, former president and Nebraska delegate; and Dr. Blair Bauer, former Governor of District 1 and North Dakota delegate.

ACA Annual Meeting Features Election of New Leadership

Navigating the sea of electronic information in the Internet age can be both time-consuming and frustrating when you can’t find what you’re looking for. The American Chiropractic Association understands how valuable your time is as a busy health care professional.

That’s why ACA has designated a special “**Members Only**” section on its Web site—www.acatoday.com/membersonly—as the one place where members can go to quickly and easily access a vast array of practice tools, publications, educational materials and other exclusive electronic resources. It’s free to members. To get there, click on the **member login key** on the ACA Web site homepage and enter your member ID number and password to unlock the door to a wealth of information—instantly available at your fingertips.

Curious about the future plans of your association? Take a look at the ACA **Long Range Plan**. Interested in making your voice heard on Capitol Hill? Check out the ACA **Political**

Action Committee (PAC) under “Government Relations.”

You’ll find more than 30 **Coding and Reimbursement Alerts** that detail critical updates and proper use of the most problematic insurance billing codes for chiropractic under “Insurance and Managed Care,” along with answers to some of the most commonly asked coding questions.

Looking to raise awareness about chiropractic in your community? Get a jump on **October as Spinal Health Month**, with a downloadable kit to help get you started, along with useful tips for working with the media, located under “Patient Education/Public Awareness.” Here you’ll also find more than 40 **Patient Page fact sheets** with tips on consumer health topics, from asthma to leaf raking, to educate your patients and help generate word-of-mouth marketing about your practice.

If you’re buying or selling equipment or a practice, looking for a job or wanting to hire more staff, take advantage of the ACA **free online classifieds** under “Practice Resources.” Stay connected with other members through the ACA **online membership directory** or by joining in discussions on the **listserv**. You’ll find everything about the business end of chiropractic in **ACABizdoc**, a specialized Web resource with articles, practice pointers, quick links and a listserv for business-related questions and discussion.

Also under “Practice Resources,” you find **product discounts** at **ShopACA**, the association’s online store, where members save an average of 30 to 40 percent on more than 50 chiropractic products. And through ACA’s **affinity programs**, members receive special discounts on a host of chiropractic practice resources, from electronic claims billing to credit card processing.

JACA Online is the association’s preeminent research journal—featured in this month’s “The View From Here” column by Richard Brassard, DC, chairman of the ACA Membership Development Committee. Here, under “Publications,” you can directly connect to current or back issues of the journal and search for full-text articles. Several other publications can also be viewed or downloaded for reading.

Does ACA have your e-mail? Remember that to take advantage of these electronic benefits, you’ll need your member login ID number and password, available by sending an e-mail **today** to memberinfo@acatoday.com. Remember too to update the association if your e-mail changes, just as you would for your mailing address. In accordance with our privacy policy, ACA does not sell or distribute member e-mails to other organizations or individuals; so you can rest assured your information will be used only for ACA-related communications.

Future additions to the ACA “Members Only” page online may include monthly practice management tips, electronic newsletters and online bulletin board discussions on various topics of interest to doctors of chiropractic. The association is also planning to redesign the ACA Web site with you, the end user, in mind. We welcome your feedback and suggestions for these and other electronic resources at memberinfo@acatoday.com or by calling toll-free (800) 986-INFO (4636).

EYE OF THE STORM

How You Can Help Those Affected by Hurricanes Katrina and Rita

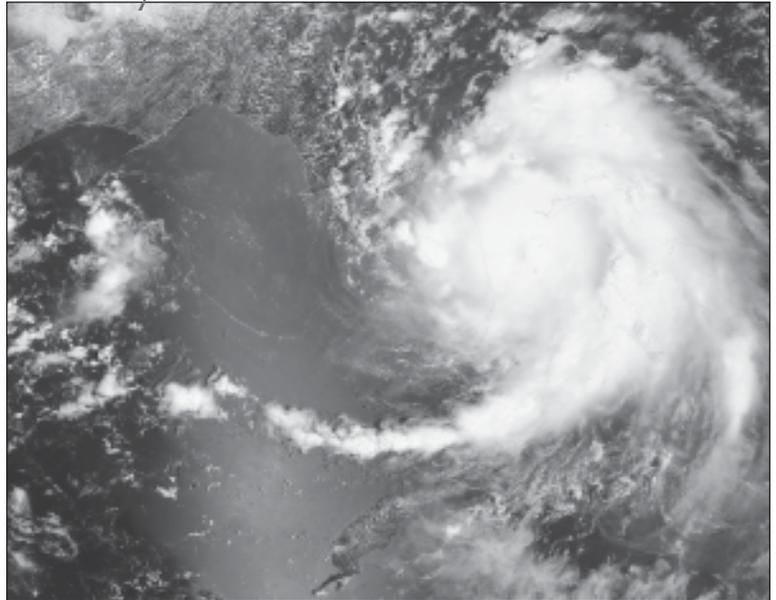
The ACA, ICA, and MCA encourage members and non-members to help those affected by Hurricane Katrina and Rita in any way they can. The ACA's Hurricane Action Center (<http://www.acatoday.com/Hurricane/index.shtml>) contains resources for doctors of chiropractic wishing to offer their services to those in need.

It also provides an outlet for doctors affected by the hurricane to share their stories. Additionally, the site has a page (http://www.acatoday.com/Hurricane/Assistance_Request.shtml) featuring individual requests for aid or materials. The Web site is open to all doctors of chiropractic, regardless of ACA membership status. Visit the Center Now!

In addition to helping organize the provision of emergency chiropractic care to the population of the devastated areas, and relief and security personnel, ICA is placing a special emphasis on assisting the chiropractic profession and chiropractic families impacted by the disaster. For more information please visit the ICA's Crisis Response Center at <http://www.3cdf.com/calinfo/katrinainfo.htm>!

Several relief funds have been set up (see below). For those who would prefer to donate their time and expertise, the Department of Health and Human Services has established a website <https://volunteer.hhs.gov> and toll-free number (1-866-KAT MEDI) to help identify health care professionals and relief personnel to assist in Hurricane Katrina relief efforts.

Doctors of chiropractic who would like to volunteer as individuals with the HHS effort can go to the Web site mentioned above and fill out the online application. Choose the "clinical physician" category, then fill in "chiropractor" under the specialty area.



Foot Levelers and Chiropractors Donate More than \$540,000 to Support Relief Efforts on Gulf Coast.

Foot Levelers has donated more than \$540,000 to the American Red Cross to support its hurricane relief efforts along the Gulf Coast. The funds were raised as part of a matching-fund campaign organized in the wake of Hurricane Katrina. More than 2,000 individual contributions—from the U.S., Canada and Japan—were made by concerned DCs during the campaign. Foot Levelers vowed to match each donation in an effort to raise as much money as possible on behalf of the chiropractic profession.

"I am truly proud of what has been accomplished," said Kent Greenawalt, president and CEO of Foot Levelers. "We have proven what wonderful things can happen when we come together. United we stand as a profession, united we stand as a country, and united we stand as humans helping each other. Thank you."

Chiropractic Associations in Louisiana and Mississippi Establish Relief Funds

CAL Relief Fund Chiropractic Association of Louisiana
3070 Teddy Drive, Suite A
Baton Rouge, LA 70809

Mississippi Chiropractic Relief Fund
Attention: Vickie Webb
134 Marion Avenue
McComb, MS 39648

Eye on Annapolis

(Continued from page 9)

REAPPOINTMENT REQUIREMENT

Documentation of clinical activity within the scope of core privileges requested during the past 24 months without significant quality variations identified.

CORE PRIVILEGES FOR CHIROPRACTIC STAFF

- Doctors of chiropractic perform history and physical examinations, order X-rays, perform manipulative procedures (adjustments), order physical therapy, and other supportive measures.
- Utilization of diagnostic facilities and procedures for responsible differential diagnosis as essential to management, co-management or referral of the patient.
- Utilizing chiropractic manipulation, physical therapy, external immobilization and nutrition where applicable.
- Providing, where needed, training in hospital protocol and procedures through CCE approved programs in our accredited colleges.
- Referring to medical specialists for management of infectious, neoplastic, or primary neurologic disease.
- Performs chiropractic functions and recognizes those situations in which care requirements are beyond his/her competence, and seeks consultation/referral.
- Instruct in occupational safety, posture, rest work rehabilitative exercises, recreational activities, health habits, adaptive life styles, and other activities of daily living that would enhance the effect of chiropractic health care.
- Does not include the use of drugs or surgery, osteopathy, obstetrics, or any other branch of medicine. Shall practice according to department, facility, and specialty-specific criteria, in accordance with federal and state standards.

Looking for Jurisprudence CE? MCA Making it Easy to Obtain

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

How Does it Work?

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!

You may make an appointment to take the test at MCA headquarters OR in conjunction with any of our other educational offerings.

Tuition

\$25 for MCA members

\$50 for non-members

Registration

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

The MCA Sports Council Wants YOU

Is Sports Chiropractic of interest to you? Do you want to work with athletes? Do you enjoy sports? The Maryland Chiropractic Association wants you.

The MCA Sports Council provides chiropractors for various athletic events in the state and opportunities for Maryland DC's to get work experience with competitive athletes. You do not have to have a lot of experience treating athletes to belong to the Sports Council. You do not have to be a sports diplomate or a certified chiropractic sports practitioner. You just have to be a member of the

MCA, be licensed to practice in the state, be interested in working with athletes and willing to work within the Sports Council protocols. That, and you will need a portable adjusting table.



The MCA Sports Council treated several athletes at the Baltimore Marathon.

The Sports Council has worked a number of events over the past year and the sports council can make itself available to work running, weightlifting, and triathlon events all around the state *if* there are enough chiropractors to be there. Call Dave Koronet, at 301-829-1717 or e-mail him at d.koronet@att.net (put "MCA Sports" in the subject box) if you are interested in being part of the MCA Sports Council.

Remembering Maryland Pioneer Dr. Brendan McNally

Dr. Brendan I. McNally recently passed away at 84. He is survived by his wife of 21 years, Evelyn.

One of the forerunners in establishing the chiropractic profession in Maryland, McNally practiced in the state for over 41 years, before moving to Arizona 10 years ago. As a testament to his commitment to the profession and his patients, he only stopped seeing patient about 6 months ago. While practicing in Fallston and Baltimore, McNally was critical in expanding rights by getting many items through state courts.

Board of Examiners *Update*

CLARIFICATION OF C.A. TRAINING ISSUES

In response to a question posed to the Board of Chiropractic Examiners, Registered chiropractic assistants (CA) may NOT independently train another CA. All hands-on clinical training in a practice MUST be done by the supervising chiropractor in the immediate treatment area. During the initial 80 hours of observation, it IS permissible for the CA. Trainee to observe the duties and procedures of a registered CA., with the supervising chiropractor in the building (does not have to be in the immediate treatment area). This clarification is made because some chiropractors were having their experienced, registered CAs conduct all of the training, including the hands-on training. This is not permitted.....training is NOT within the scope of practice of any CA.

REGULATIONS CHANGES TO COME

The Board is moving forward to amend the existing regulations, particularly in the area of supervising chiropractors and chiropractic assistant practice. The Board will hold an open-to-the-public General Session Meeting at 10:00 a.m. on Thursday, November 10, 2005. At the meeting, the public will have input into amending the COMAR pertaining to chiropractic practice.

2005 RENEWALS COMPLETED; BE AWARE OF CEU & CPR REQUIREMENTS

The renewal covering the 2005-2007 biennial period was completed in September. A total of 731 Active, 101 inactive and 543 non-renewed chiropractors were processed and recorded into the database. A total of \$ 438,966 was collected in renewal fees. A total of 17 licensees were delinquent and were fined \$ 500.00 each in late fees. Generally, the renewal went smoothly, however, in auditing 1 out-of-seven chiropractors, it was noted that several had not kept up with CEU requirements and CPR Certification. It is categorically important for chiropractors to maintain CPR certification at all times when practicing. This is important from a professional as well as a risk management point of view. It is also important to keep abreast with current chiropractic trends and practice by taking meaningful CEU courses. Remember, over the 2-year biennial period, chiropractors must successfully complete a minimum of 48 CEU hours.

MCA *update*

Advancing the Chiropractic Profession in Maryland!
E-Newsletter

October 2005

The MCA Update is an additional benefit of membership in MCA. Published on a bimonthly basis, this e-newsletter will provide you with up-to-date information on MCA as well as the latest news concerning chiropractic in Maryland. As always, check out www.MarylandChiro.com for the most current information on Chiropractic in Maryland.

Inside this Issue

- [Earlybird Registration Extended for MCA's 2005 Convention](#)
- [Help us Help You! Turn in Your CareFirst Children's Treatment Survey](#)
- [Dr. Neil Cohen Hosts Successful Event for Sen. Jim Beachle](#)
- [How Can You Help Those Affected by Hurricane Katrina?](#)
- [Remembering Maryland Pioneer Dr. Brendan I. McNally](#)
- [Classifieds](#)

Earlybird Registration Extended for MCA's 2005 Convention

The MCA has extended the earlybird registration for its 2005 Convention & CE Forum. This program will offer up to 13 hours of approved CE with this year's speakers bringing you up to date on new developments in contemporary topics including the role of the cervical spine in the origin of headache symptoms and performing the most appropriate tests in assessing patients in a timely and efficient manner.



In addition such first-rate education programs, the Convention also offers invaluable networking opportunities.

Have YOU Been Receiving MCA's E-Newsletter?

The Maryland Chiropractic Association is happy to announce the launch of the **MCA Update**. An additional benefit of membership in MCA, this e-newsletter will provide you with up-to-date information on MCA as well as the latest news concerning chiropractic in Maryland.

If you did not receive MCA Update in your email during October, please call MCA headquarters at 410-625-1155 to confirm that we have your correct email address on file.

The MCA Update will be 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 on legislative action, MCA's education offerings, etc. during months when the MCA Journal is not mailed to member.

"This is just another case where MCA is taking advantage of technology to communicate with its members," said Communications Manager Eric Grammer. "Were always trying to provide members with the most up-to-date information and fusing email and the internet is allowing us to basically expand our bimonthly newsletter to a monthly publication."

Grammer noted that one of the added benefits of monthly coverage is allowing for monthly classifieds for those chiropractors who may have an unexpected staff shortage.

While MCA is excited to announce the launch of this new vehicle for communication with our membership, MCA encourages all members to continue to visit www.MarylandChiro.com for the most current information on Chiropractic in Maryland.

Thanks to MCA Supporters

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

Knaub & Associates, P.A.

Ray Knaub

Biotics Research Corp.

John Rosenbaum

Impact Coaching, LLC

Larry Berlin, DC

Metro Marketing

Laurie Dengel

Plymouth Bell Laboratories

Rhoda Dowie

Nutri-West Mid Atlantic

Amy Hare

World Connections, Inc.

Steve Middleton

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 January 3, 2006. The deadline for classifieds is December 12.

DC Seeking Position — P-I/wellnes experience/sports injury background. PT privileges granted. Contact Dr. Jai at 410-464-9045 or 410-419-1440. (9/05)

Associate Wanted — Clinic Directors needed for Baltimore City/P.G. County. Administrative/Clinical experience preferred. Base salary with incentives offered. Fax resume to 301-434-0920 or call 301-585-3200. (1/06)

Associate Wanted — Associate/Partner wanted for Northwest (Pikesville/Owings Mills) office. Build your own practice. Full-time or part-time. PT privileges required. Call Dr. Adam Fiedl @ 410-917-2282. (11/05)

Associate Wanted — This is a great opportunity to earn and learn in Westminster. Busy chiropractic office will train an energetic people person with good work ethic to be a successful chiropractor. Unlimited growth and income potential. Call Dr. Wallace at 410-790-1335. (1/06)

Associate Wanted — PT/FT for PI practice in Prince George's County. Must be professional and motivated. Long term or partnership potential available. Salary plus bonuses. PT privileges required. Fax resume to 240-430-3001. (1/06)

Associate Wanted — Salary and Commission with full benefits package. Excellent long-term potential. Great opportunity for a motivated individual. Beautiful southern Maryland. Fax resume to 301-609-9985. (1/06)

Associate Wanted — Looking for FT associate for PI practice, various locations. Excellent salary with benefits. No marketing required. Please fax resume ATTN: Susan Zambado, 301-459-7927. (11/05)

Associates Wanted — Glen Burnie & Fells Point. Well established family practices. Great opportunity for the right doctors to become part of a winning team. Excellent salary and benefits. Call Dawn 410-761-7955. (1/06)

Associates/Owners/Partners/Coverage Docs/Practices for Sale Wanted — We are a multiple practice group (DC, MD, VA) and are always looking for one or more of the above. If you are exploring your opportunities, contact me. I may have exactly what you're looking for. Rick.Schmitt@comcast.net or fax to 301-970-2273. (9/06)

Practice For Sale — Established downtown Baltimore office for sale. Price negotiable. Call 301-585-3200. (1/06)

Practice For Sale — Northeast Baltimore. All equipment and tables. Mostly PI. Excellent chance for additional growth. Low overhead. Serious inquiries only. 410-358-7043. (11/05)

Practice For Sale — Spacious state of the art practice in Edgewater for sale. Please call 410-798-7796 or 443-306-0796. Ask for Dr. Bartel. (1/06)

Practice For Sale — Chiropractic practice for sale in Ellicott City. Fully equipped. \$10,000. Call 410-581-9966 for details. (11/05)

CA Office Coverage — Attention doctors. My name is Dori Donner and I am a licensed CA looking to do coverage work in the evenings and on weekends. Feel free to call me at 443-465-3999 or email me at ddonner74@yahoo.com. (1/06)

Office Coverage — Want a break? Need a break? Whatever the reason, leave your practice in capable hands. A 1998 Palmer graduate w/ clinic ownership experience. Licensed DC w/PT privileges ready to help. Contact Dr. Gary Amaral - 410-365-6891 or ahcps@verizon.net. (1/07)

Office Coverage — Licensed, experienced DC with PT privileges available for vacation relief. Multiple references, including high volume. Please call Charles Weitzman D.C., 443-929-2001. (1/06)

Office Coverage — Licensed, experienced and insured DC with PT privileges. Please contact at 410-901-2903 or DrEdAChiro@bcctv.com. (3/06)

Office Coverage — Available for office coverage. 16 years of private practice experience. professional, personal care, reliable. Dr. Hoffman, pager 410-324-0990, office 410-668-2266. (11/05)

Office Coverage — Female chiropractor with PT privileges and over 4 years of clinical experience available for coverage on weekends only. Will fax resume. Contact Dr. Rachel Ash, 301-512-8756. (11/05)

Chiropractic Assistant Wanted — Multi-specialty HealthCare is seeking a CCA. Travel sometimes needed. Please fax resume to HR fax 410-933-4835 or ldolezal@amm.bz. (11/05)

Front Desk Position Wanted — Seeking pleasant, dynamic person for our family practice in Pasaden. FT/PT. Please fax resume to 410-360-0064. (11/05)