

KCA COMMUNIQUE

June 2007

KCA
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ACA Calls for Five Patient Records from Every Doctor. In a nationwide conference call followed by detailed written guidelines, the American Chiropractic Association has announced a new campaign "...unprecedented in the history of chiropractic and a campaign that has the prospect of significantly improving patient care and ending the intolerable demands made on doctors (*by managed care organizations*)". Because of a fortunate alignment of interest in managed care claims abuses by several state insurance commissioners and state attorneys general ACA has been told that now is the time to assemble actual patient records showing reasonable and necessary care that has been denied for payment. ACA is asking every DC in the nation to submit five unsanitized claims denials, along with specific patient records, HIPAA patient sign-offs and a Business Associate Agreement form. The patient records that are needed are completed patient intake forms, completed diagnostic testing reports, chart notes and all forms that show a complete chronology of the interaction with the managed care organization.

ACA has been in communication with several state departments of insurance and attorneys general concerning tactics by managed care networks that, in ACA's view, limit reasonable and necessary treatment and can put patient care at risk. These agencies are now ready to take a closer look at the allegations. "The only way that state authorities will act is if they have the 'ammunition' to take on the powerful managed care companies," says Dr. Richard Brassard, ACA president. To help in this campaign doctors must take the following steps, using forms available at acatoday.org/datacollection:

1. Read and sign the Business Associate Agreement, which allows you to send ACA unsanitized records for this project or in the future.
2. Identify patients harmed by managed care policies by having their necessary chiropractic care denied in whole or in part.
3. Obtain HIPAA authorization from your patient by explaining their rights as outlined on the ACA patient information sheet provided to you.
4. Mail the requested documents to the American Chiropractic Association, Attention: Insurance Relations/Records, 1701 Clarendon Blvd., Arlington, VA 22209.

Need Clothes? A Michigan DC is asking KCA members to help him find an outlet for mounds of donated clothing recently collected for victims of the Greensburg, Kansas tornado. Dr. David Kolbus, owner of Orchard Lake Chiropractic in Farmington Hills, Michigan, conducted a clothing drive, "Clothes for Kansas," and generous donations poured in. He is now hoping a company or individual will donate the use of a rental truck and some gasoline cards to help defray the high cost of a trip to Kansas. "I have enough stuff to fill a 24-foot truck," said Dr. Kolbus, who has experience in delivering necessities to disaster victims. He drove a Ryder truck filled with goods to Hurricane Katrina victims in Biloxi, Miss., two years ago.

In a phone call to KCA, Dr. Kolbus said that he is hoping to find a local DC contact in central Kansas who can help him locate an outlet for the clothes. Please call Dr. Kolbus directly at (248) 489-9700 or call the KCA office if you can help.

Correction: PT Limited Access Bill Did Pass after

All. Last month's story concerning H. B. 2483 not getting out of conference committee by the time of the adjournment was in error. KCA research showed no committee report was submitted, the normal indicator of conference committee action. However, last-day action by Senate and House negotiators resulted in the H. B. 2483 language being inserted into S. B. 11, a health care reform measure that eventually passed and was signed into law by the Governor. Therefore, the measure allowing physical therapy services for existing conditions for a 30-day period without physician referral is now law.

New Doctor Seminar a Big Success. KCA's annual educational seminar for new doctors was held June 14 in Topeka with an attendance of 34, including old doctors. The average for recent past years has been 25. The program included practice start-up tips, legal and ethical considerations for practice success and updates on Medicare and X-ray technology. One of the highlights of the program was a free-ranging question-and-answer discussion with KCA's Young Doctor of the Year Dr. Tobi Jeurink over the lunch hour. In addition, KCA Membership Chair Dr. Kenyon Erickson and KCA Legislative Chair Dr. Travis Oller explained the benefits and the importance of being a member of KCA to the new doctors.

BC/BS of Kansas Out of Medicare Soon. The Kansas contract for Medicare claims processing, which will now include work for all four states in the federal CMS region, will not be going to Blue Cross/Blue Shield of Kansas. The company has been informed that its bid for the work, which it has done for decades, was not within the competitive range of other bids. That finding means that the bid will be dropped by CMS,

according to the company. The winning bid is expected to be announced sometime after July, 2007, and may not take force until early 2008. KCA has been in contact with claims processing executives at BC/BS of Kansas and the KCA Medicare Committee and staff will be researching other contractors still in the bidding process to attempt to determine what policy changes could come for Kansas providers.

Congressman Moran's Work Is Paying Off. The U. S. House of Representatives has passed amendments to the Veterans Administration Health Care Enhancement Act of 2001 that would require chiropractic services be available to veterans at all VA medical centers. The legislation, H. R. 1470, has been promoted by Kansas Rep. Jerry Moran since KCA members met with him on the matter in March in Washington. No schedule is set for action in the Senate yet.

Your Board Report. The KCA Board of Directors met June 14 in Topeka and the following are some of the items covered:

- KCA Secretary/Treasurer Dr. Paul Brackeen submitted a newly-formatted financial report comparing revenues and expenses for 2007 with the budget for each major category and with the same month last year. He reported \$149,140 in revenues so far this year, with expenses at \$72,766. He said Spring Convention income was substantially above last year's total and that \$18,161 was netted for the event. In addition, it was reported that the KCA Budget and Finance Committee had met by conference call to review steps needed to strengthen internal controls for the KCA financial system.
- Dr. Vinton Arnett and Dr. Gary Counselman of the Board of Healing Arts reported on a new Board subcommittee that will look at the problem of experimental procedures that are not

taught in schools of chiropractic. Developing the definition of "experimental" will be their first task.

- Dr. Tim Warren submitted a written report of activity by the KCA Insurance Committee on several complaints of denial of claims by insurance carriers. Some cases have been referred to legal counsel while others involved documentation problems. The Committee also is working on a way to prioritize insurance claims issues for KCA action.

- KCA Legal Counsel Judy Pope reported on work ongoing by members on reviewing KCA Board resolutions that have passed in prior years. She said some are out-of-date or unneeded now and that the workgroup will be recommending to the Board that all resolutions be dropped and only those that are necessary by readopted.

- KCA President Dr. Gail Boyer reported that communications are ongoing between COCSA, ACA and ICA on the issue of ACA/ICA merger. She also reported on her participation in a health care discussion on KCUR radio in Kansas City.

- KCA Executive Director John Kiefhaber reported that office staff have been working with visitors bureaus around the state on future locations for KCA conventions and education events. He also reported on comments submitted to the Kansas Insurance Department concerning proposed changes to utilization review regulations. He said that KCA would not be willing to accept new definitions of "clinical peer" that would allow non-chiropractors to review medical necessity of chiropractic services.

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