

A message from a PCA member to all PA DC's! Page 9 2017 Annual Convention: Kalahari Resort Page 14-15

# PCA Established

# PCA- ALWAYS Here for YOU

Raymond J. Benedetto, DC, DACNB - PCA President



Wow! June already. 2017 is flying by and we've accomplished so much in just the first half of the year, yet we have a full plate of goals and objectives ahead of us. Please rest assured that the PCA continues its diligent work each and every day in sup-

port of you, our members and for Chiropractic in the Commonwealth. And to that end, I'd like to reiterate the fact that we are ALWAYS here for you if you need us so please reach out if you have any questions or concerns.

There is a lot to discuss, so let's dive right in...

I'd like to continue with the format of my President's message with a quick recap of what has transpired since our last PCA DIRECT and some things to look forward to in the future – for the rest of 2017 and beyond...

# **Enhanced Communications**

One of my primary objectives as President has been to enhance communication within the Executive Team, Board of Directors and with you the members. To enhance your membership experience, allow for greater action to be taken at the Board level and to keep everyone 'on the

same page' as to the many pressing issues facing our profession. PCA's Executive Team meets weekly via conference call to discuss anything and everything PCA, ranging from collaboration with other health professions to legal matters and, of

We are starting to see bi-partisan support for PCA's CCF language in upcoming bills that pertain to containing health care costs, properly prescribing addictive drugs as a means of avoiding opioid addiction, etc.

course, always including legislative/ regulatory initiatives and responses. Members can be confident that PCA is 'watching your back' every day and always ready to respond to issues where appropriate. I also hope you've been enjoying the video format of the 5 Minute Update, as much as I've enjoyed making them. 5MU will continue. One last important communications point: our new website and member management software is in the final implementation phase at the home office. If you haven't already done so, please go to www.pennchiro.org and explore PCA's new website. I think you'll like it, and as always, PCA remains very receptive to your constructive criticisms and comments about our ever-evolving web site!

Summer

Issue

2017

### **Conservative Care First**

For months now, we have been doing everything we can to get our 'Conservative (Chiropractic) Care First' message out to anyone who will listen and I'm pleased to report that we're starting to gain some political traction, especially in context of the nation-wide opioid 'crisis.' Hopefully to meaningfully address this opioid tragedy, we developed this 'CCF strategy,' which kicked off last fall after meeting with Governor Wolf. You'll see that CCF is prominent on PCA's web site, including a link to PCA's definition of conservative care first. We have ongoing PR campaigns and are starting to see bipartisan support for PCA's CCF language in upcoming bills that pertain to containing health care costs, properly prescribing addictive drugs as a means of avoiding

Members can be confident that PCA is 'watching your back' every day and always ready to respond to issues where appropriate.

opioid addiction, etc. Stay tuned on this one, especially PCA's policy briefing on conservative care first to the Senate's majority and minority committee chairs in late September, as well as a potential House briefing when the General Assembly returns from their summer recess.

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### **PCA Redistricting**

I've been discussing this topic for quite some time now in these articles and the implementation date for a new organizational model is set for 2018. At our last Board of Directors meeting (April 22), the Board finalized and approved a new district structure. Over the next several months, PCA will be consolidating our current 14 districts into 3 geographic regions, moving to an online "go-tomeeting"-style format for district meetings, starting 3 regional CE conferences to continue to bring PCA to the members, and streamlining the day-today operational support of districts to maximize growth and organizational efficiency. Look for the finalized plan to be sent to you over the coming months, including discussion at PCA's 2017 Annual

Meeting of Members (Saturday, October 21 at Kalahari Resort), so we will have plenty of time to discuss and prepare for these significant structural changes in 2018.

# PCA's Annual Convention at Kalahari Resorts!

Lastly, and I'm sure you're all aware of this by now, our 2017 Annual Convention is this October 21-22 at Kalahari Resorts in the Poconos. It's America's largest indoor water park and the schedule is packed with some great CE programs and family fun. The Board held our last meeting at the Kalahari and I know that every Board attendee was 'over-the-top' excited for this year's convention. Bring your families and let's enjoy a great turn out for this year's convention. I promise you won't be

disappointed in the Kalahari 's amenities or the Annual Convention Committee's program, which will include a very provocative look into the future of our profession, including both sides of the 'philosophy' issue.

That's all for this issue of my PCA President's Message! If you have any questions or need anything from me or the PCA, please reach out to us by email or phone call. We're here to serve you, PCA's members.

Have a healthy, relaxing and prosperous Summer of '17... and ENJOY!

Dr. Ray Benedetto practices in Bethlehem, PA at Lehigh Valley Chronic Care.



# 2017 Community Outreach Project

Donate today!



With only a few days left before our National Convention, efforts are still under way to collect donations for <a href="The Center for African American Health--Denver">The Center for African American Health--Denver</a> (CAAH). Even if you can't join us in Denver this year, please consider making a nominal donation toward our 2017 Community Outreach Project.

The Center for African American Health is a community-based nonprofit organization dedicated to improving the health and well-being of African Americans. The Center works toward health equality for the underserved African American community by offering culturally competent health education and outreach that empowers community members to overcome the root causes of health problems, maximize their own individual health and access health and support services.

#### LEGAL PAD

#### TREATMENT PLANS - NOT JUST A SCHEDULE OF CARE

#### Jason B. Martin, Esquire, PCA General Counsel

Throughout the years, I have represented hundreds of Doctors of Chiropractic who face an insurance or Medicare audit. As everyone knows by now, an audit is a post-payment review of medical records by the payer to determine whether the documentation satisfies the payer's guidelines and medical policies. In addition, the payer will review the documentation to determine whether the appropriate code was submitted and paid (e.g. level 2 v. level 3 office visit code). Chiropractors often face overpayment determinations and recoupment because the documentation is deemed insufficient by the payer.

If and when the payer determines that services were not medically necessary or that functional improvement was not properly documented, the payer will retroactively deny the claims submitted after that date. When this occurs, the payer expects the Chiropractor to return those "improperly" paid claims. So, for example, if a patient receives treatment for eight (8) weeks, but the payer determines following a review of the records that treatment after four (4) weeks was maintenance care and should have been billed as such, the payer will request the Chiropractor to pay back all of the "improperly" paid claims for those four (4) weeks

Medical records should include a treatment plan, SOAP notes, examinations, and diagnostic testing at a minimum. Treatment plans are perhaps the most important part of Chiropractors' medical records. A comprehensive treatment plan can prevent an unfavorable audit determination or it can serve as the first line of defense to any overpayment determination. A comprehensive treatment plan should include all of the following:

- Patient's full name, address, birth date, sex and other identifying information;
- Patient complaints and reasons for visit;
- The patient's case history;
- Findings of all examinations performed including functional limitations;
- Conditions and severity;
- Findings of any diagnostic studies;
- Diagnosis and anticipated goals;

- Clinical impression, including rationale for changes in diagnosis, if any;
- Long term and short term goals along with a reasonable estimate of duration (number of weeks) and frequency (number of visits);
- Orders for tests or consultations and the clinical indications and results; and
- Identification of the type of treatment and equipment utilized.

Treatment plans are perhaps the most important part of Chiropractors' medical records. A comprehensive treatment plan can prevent an unfavorable audit determination or it can serve as the first line of defense to any overpayment determination.

By documenting each of the foregoing criteria, you are providing direction for an individualized plan of care. A specific plan of care will provide a "road map" for the patient's need for care and justification for the services provided to the patient. It will also help establish timeframes for re-evaluations.

Jason B. Martin, Esquire is the founder of The Martin Law Firm, P.C. Mr. Martin represents Pennsylvania chiropractors and other health care providers in the areas of compliance, insurance audits and recoupment, Act 6 peer reviews, Medicare audits and appeals, licensure and disciplinary matters, and other related areas. Mr. Martin also currently serves as general counsel to the Pennsylvania Chiropractic Association.

Visit his website at <a href="http://www.jbmartinlaw.com/healthcare-attorney">http://www.jbmartinlaw.com/healthcare-attorney</a>





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2017 Annual Convention

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- 13. Anthony Geramita, DC
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# **CE Committee Report**

# Is There a Relationship Between Heartburn, Stress and Continuing Education?!

Alison Benedetto, DC, Chair, CE Committee

Actually, those things are not related at all... or at least they shouldn't be! Let me ask you a question...

What do you think of when you hear the words, "Continuing Education?" Do you immediately get annoyed and start thinking about time off from your office, money spent on courses and hotel rooms, and boring, long-winded speakers? Or do you get excited about the opportunity to learn as much information as possible in your profession, hone your skills so that you can provide the best care for your patients and save money on course fees and hotel rooms because you are a member of the PCA? Well... I hope your response was the latter and not the former!

The *real* benefit of continuing education, aside from being given the opportunity to absorb as much information as possible, is how you can advance your career organically while doing something you love.

CE is not something that is designed to give you heartburn and headaches. CE is a vital component of your day-to-day practice. It gives you, the doctor, the information and skills to fill the gap between delivering your current health care services and optimal health care. CE fosters self-confidence, in that you are providing

the most current, evidence-based care that will ultimately increase patient outcomes and satisfaction. The *real* benefit of continuing education, aside from being given the opportunity to absorb as much information as possible, is how you can advance your career organically while doing something you love.

As technology continues to advance, so are your opportunities for obtaining highquality continuing education. At this point in time, there is still no mandate on how PA CEs must be obtained; you can take all 24 hours at live, in-person seminars or do them all online. With schedules getting busier and life getting more hectic, there has never been a better time to take advantage of PCA's Online University. Hundreds of hours are available from short 1 hour CE courses to longer 12 CE course modules. There's certainly something there for everyone! And, even better, your first hour is free! Check out our online university at http:// pennchiro.myicourse.com.

WHY use PCA for CE? The goal of the PCA is to bring these relevant, evidence-based courses to our members at significantly discounted rates, in varied locations and with engaging speakers. Did you know that as a PCA member, you save nearly 50 % with each course you take through the PCA? Did you know, that as PCA member, taking just 4 CE courses will save you the equivalent cost of your PCA membership?

PCA only offers these discounted course rates to members as a benefit and as a way to THANK YOU for your membership in PCA! We truly appreciate the value you place on being a member of the PCA.

Did you know that as a PCA member, you save nearly 50 % with each course you take through the PCA? Did you know, that as PCA member, taking just 4 CE courses will save you the equivalent cost of your PCA membership?

I believe it is extremely important for doctors to truly understand the role and importance of continuing education in their practices and to the growth of their profession. Look at obtaining CE credits as an opportunity to further develop your skills and knowledge so that you can be the best chiropractor for your patients, not as a headache or nuisance!

I wish you a very healthy and happy summer and hope to see you at our <u>upcoming</u> <u>CE courses</u>!!

Dr. Alison Benedetto practices in Bethlehem, PA at Lehigh Valley Chronic Care.



# **PCA CE Calendar**

# July

8-9

Sports Chiropractic 15

Laser Therapy & Pain Relief

# **August**

19

Extremity
Extravaganza!

# September

9

Mastering Thyroid
-An Intro

16

Documentation & Risk Mgmt

29-30

Posture, Therapy/ Exercise



23-24

Healthy Aging & Peak Performance

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# **PCA Insurance Committee Report**

# Dealing With Workers' Compensation (WC) Discount Networks

David Novatnak, DC & Mary Rutkowski, DC - Co-Chairs, Insurance Committee

We are sure that every DC has received a phone call from a workers' compensation discount network. The call usually goes something like this... or in our opinion, at least it should go like this:

WCN (workers' compensation network): We have injured workers in your area and we would like them to be treated by you.

### DC (Doctor of Chiropractic):

Well, please send them in.

**WCN:** I can't send them in- you are not in our workers' compensation network. We have many companies in your area.

**DC**: Can you send me a list of the companies in my area?

**WCN**: What area are you in?

DC: (Names area)

WCN: Well, I don't have a specific list for your area, but I can send you a list of the companies that are working with us. We can get you on the panel and these people can come in and treat with you.

**DC:** Do you have a fee schedule that you can send to me?

WCN: Sure, do you want the information emailed or faxed?

DC: E-mail would be fine. The address is XXXXXXX.net. For the discount that you are proposing, I am requiring four workers' compensation patients a month. I need that provision to be part of

the contract.

**WCN:** We can't do that. We can't guarantee new patients. **DC:** Thank you for the information, but I am not interested.

The PCA strongly encourages you to have your practice's attorney review the proposed contract before you sign so you know exactly what you are getting into.

These WC Discount Network offers can arrive in your office by mail and/ or fax. When you receive the information, typically there are very few if any companies in your area. In addition, the workers' compensation network fee schedule is often severely discounted from the mandated Pennsylvania Workers' Compensation fee schedule.

The PCA strongly encourages you to have your practice's attorney review the proposed contract before you sign so you know exactly what you are getting into. If you choose to sign-up with WC and become a network provider, some DCs' experiences have shown that there are workers' compensation patients whom the WC system has started to cut reimbursements. Other workers' compensation carriers use the discounted network. In some cases, the provider did not receive a single workers' compensation patient. And that is not the worst of it-some contracts contain provisions that once a DC notifies the workers' compensation network of the desire to terminate the WC contract, there could be a 180-day waiting period imposed before contract termina-

## **A Solution Worth Pursuing**

If you have joined a WC discount network and want out, one of the PCA Insurance Committee's members, ChiroAbility's Karin Toner Pierce has an interesting solution. But it is much more than getting out of a bad contract...as importantly, it is



about your right to be paid the full mandated fee.

For example, when one of Ms. Toner Pierce's doctors/ clients received the discounted fee, she filed a Fee Review Request with the PA Bureau of Workers' Compensation. The Fee Review document can be found here:

http://www.dli.pa.gov/Businesses/ Compensation/WC/claims/wcais/ Documents/wcais%20forms/LIBC-507% 20int.pdf

...it is much more than getting out of a bad contract...as importantly, it is about your right to be paid the full mandated fee.

Ms. Toner Pierce's doctor/ client also wanted out of the workers' compensation network earlier than the 180 days, but the network would not let the doctor/client out.

#### **Fee Review Outcome**

The Bureau of Workers' Compensation ordered the workers' compensation carrier to pay Toner Pierce's doctor/client the balance of the mandated fee schedule. In addition, the workers' compensation discount network allowed the doctor/ client out of the contract earlier than the 180-day waiting period.

Ms. Toner Pierce has used this approach and has prevailed several times. If you find yourself in this predicament, you may want to solve it in this manner.

We thank ChiroAbility's Karin Toner Pierce for sharing her solution to this dilemma!

Karin Toner Pierce is the owner of ChiroAbility in Downingtown, PA, a Strategic Business Partner of PCA, and volunteers on the Insurance Committee.



David Novatnak, DC, practices in Pottsville, PA at Doctors Choice Physical Medicine & Rehab and Mary Rutkowski, DC, practices in Center Valley, PA at Center Valley Chiropractic.

# How Well Do YOU Like Being A Doctor of Chiropractic in Pennsylvania? Robert M. Werley, Jr., D.C.

Recently, several things have come about that can hurt our profession, and my perspective, both personal and professional, is that OUR profession is WAY overdue to "get a backbone" and take strong and lasting stands for our profession and patients, no matter our busy lives, fixations on the past or frustrations with our public servants who have become more politicians than servants of the public's well-being. Let's start with one very timely and contentious issue.

House Bill 18 can substantially hurt Chiropractic as we know it. This supposed workers' comp "reform" bill, sponsored by state Rep. Ryan MacKenzie and his "big business" campaign contributors (I'll address that point in a minute), deals with Evidence-Based Medicine Guidelines (EBM), which is nothing more than a cookie-cutter approach that truly only works for the employers and the insurance carriers and NEVER for the injured employees or treating health providers.



This bill will limit the treatment (s) available for <u>OUR</u> patients, proving to short change their ability to properly heal in order to return to gainful employment in a full capacity. Furthermore, the treating doctor is undermined by **Utilization Reviews** that are truly flawed due to only glancing at the provider's notes for care. In order to gain a true perspective of the work comp injury and the improving status of the patient, all utilization reviews, in my opinion, should also interview the patient in order to assess if the care is actually working for the injured party.

This being said, we as a collaborative group of health professionals need to fo-

...we as a collaborative group of health professionals need to focus our attention on our profession and make sure that Chiropractic not only remains a mainstream portal for helping people, but also survives for many decades to come.

cus our attention on our profession and make sure that Chiropractic not only remains a mainstream portal for helping people, but also survives for many decades to come. Chiropractic, including OUR Conservative Care First initiative, is too valuable a resource to let it be taken away from us, especially if it's due to OUR complacency. When it comes to advocating for legislative or regulatory changes, there is only one way, in my opinion, for every Chiropractor in Pennsylvania to be heard-talk face-to-face, wherever possible, with your legislators, both state (PA General Assembly) and federal (US Congress).

I recently had a meeting with Pennsylvania State Representative Anthony DeLuca (D- Allegheny). He took the time to talk with AND LISTEN TO me over my concerns with the aforementioned House Bill 18. Unfortunately, Mr. DeLuca stated to me, "My hands are tied with the bill due to a Republican majority." He went on to say, "They are not being bipartisan at this point." But he was helpful in listing a name or two who we should contact to let our voices be heard.

Mr. DeLuca stressed the fact that we should not bother with emails, faxes and phone calls about whatever topic we wish to address. The representatives do not have the time to read every email and fax that comes into their office every day, and they do not have the time to take the large numbers of phone call that deluge their offices on these controversial matters. There is only one way to be heard he stated: "Meet with your representatives face-to-face on a regular basis, not just in the time (s) of need." If we meet legislators face-to-face and serve as health care resources in their districts, they will know us and remember us and

there is a better chance the representative will remember the issue because they can place the name with the face.

In addition, the PCA is only as influential as the number of PA DCs it represents, so your help is needed by being a PCA member, as well as a face of and a voice for OUR profession and patients. Would it not be a great deal easier if all 4,000 plus Doctors of Chiropractic in Pennsylvania were involved with their state legislators in some capacity? I'm sure it would be!

My bottom line? Step up! Don't wait for someone else to do something for you. You teach your patients to take personal responsibility for their health, so the same applies to you! Be an engaged voice or accept the fact that, by your silence, you are killing our profession at a time when Chiropractic is more sorely needed than ever before in our 100+ year profession.

...If we meet legislators face-toface and serve as health care resources in their districts, they will know us and remember us and there is a better chance the representative will remember the issue

PS: Please remember that the PCA's Political Action Committee (PAC) Fund needs our ongoing help. OUR PCA is only as strong as its' members. New members are always welcomed and needed!

So, in closing....

HOW WELL DO YOU LIKE BEING A DOC-TOR OF CHIROPRACTIC IN PENNSYLVANIA AND WHAT DO YOU PLAN TO DO TO MAKE PENNSYLVANIA'S CHIROPRACTIC PROFESSION THRIVE, RATHER THAN JUST SURVIVE? I CHOOSE THRIVING OVER SURVIVING AND HOPE YOU DO, TOO!

Dr. Robert Werley practices in Verona, Pennsylvania and has been a PCA member since 2012.



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# **Legislative Report**

# What PA Association Has Your Back? Only YOUR PCA.

Mark Singel, the Winter Group, PCA Lobbyist

# You Took the Time to Take a Stand That Protects Patients' Rights and Guards Against Reckless WC Tampering

Last week's session of the PA House of Representatives resulted in a big win for PCA and for patients throughout Pennsylvania!

The PCA took on the massive challenge of opposing House Bill 18 (HB 18), which would have introduced the concept of a medically evidence-based formulary for prescribing drugs in the workers' compensation system. While the supposed motivation behind HB 18 was to reduce the over-prescription of opioid painkillers, most DCs have clearly noted that evidence-based programs in the past have done just the opposite.

Knowing the history of such previous efforts, PCA raised the question: If the intention of HB 18 is to reduce the use of addictive drugs like opioids, will the bill then authorize a "conservative care first" approach to treating injured workers, including increased visits to Chiropractors and other drugless professionals as THE drug-free alternative to the more drugfocused, pharmaceutically supported allopathic and osteopathic professionals?

PCA, in collaboration with numerous health care providers, the PA Justice Coalition and various labor organizations, rallied against big business's HB 18 and effectively opposed any "one-size-fits-all" approach to patient care. Similar to last year's efforts against HB 1800, PCA argued that this bill would open the door to new guidelines for workers' compensation, based upon "evidence-based" medicine. It also would have required new standards for UROs (Utilization Review Organizations) and PROs (Peer Review Organizations). PCA's response was simple and emphatic: the Workers Comp system should allow injured patients to explore the treatment regimen that is most effective for their injuries, not something that insurers have devised to meet their own predictably profitcentered needs.

If the intention of HB 18 is to reduce the use of addictive drugs like opioids, will the bill then authorize a "conservative care first" approach to treating injured workers, including increased visits to Chiropractors and other drugless professionals as THE drug-free alternative to the more drug-focused, pharmaceutically supported allopathic and osteopathic

PCA and its allies scored a major victory when a motion to re-refer the bill was adopted on the House floor by a vote of 102-94. HB 18 is likely to stay in the Rules Committee – at least for the foreseeable future. After the legislature returns from summer recess, it is expected that there will be another effort to advance HB 18, so all Pennsylvania DCs should remain very vigilant throughout the next few months.

Congratulations to all PCA leaders and members who took the time from their practices to engage with their respective state Representatives and helped defeat, for the moment, this misguided legislative effort!

# Independence Blue Cross Fee Cuts: slated for August 1

PCA members from southeast PA continue to report that insurers seem to be arbitrarily reducing payments for certain Chiropractic services and likewise creating more disparity amongst professions by paying some providers at much higher rates than others for the same service code. The situation moved to the front burner of PCA's advocacy efforts when IBX cut payments three times in the past several months.

In response, PCA mobilized a working group on the fee cuts and charged the group to develop an action plan. The results to date:

A. PCA President Ray Benedetto made a formal request to IBX's CEO, Daniel Hilferty, to meet on this matter, and

B. PCA continues to work with the PA Insurance Department and the PA General Assembly to both educate and seek relief and corrective action on this issue.

### **Equal Fees for Equal Work**

In addition to fee reductions, PCA has raised the issue of disparity in payments between health care providers. Despite clear anti-discrimination language in the ACA, Pennsylvania insurers appear to be engaging in practices that pay Chiropractors considerably less for the same service codes performed by physical therapists, orthopedic surgeons, or nurse practitioners. PCA is working directly with Representative Steve Barrar (R- Delaware, Chester) to outlaw such discriminatory practices via legislative relief.

#### Conservative Care First (CCF)

Some real progress on "conservative care first" on two fronts:

First, Representative Ed Neilson (D- Philadelphia and no relation to "our" Ed Nielsen!) will be introducing an opioid prescribing bill that, for the first time, expresses a preference for conservative care over continuing to prescribe opioids. As Representative Neilson states: "This measure would encourage prescribers to first recommend the use of conservative care management (non-pharmacological) and treatment prior to issuing a prescription for a controlled substance containing an opioid."

Second, during the heated battle over HB 18 (see lead article), PCA raised the issue of conservative care in the form of a proposed amendment. While HB 18 has been

derailed for the time being, the notion of conservative care is beginning to take root.



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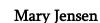
# Tracy Wasinski

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# MEET PCA'S STAFF

Ed Nielsen has served as PCA's Executive Vice President since 2010, and describes his role at PCA as multi-faceted- he functions as advocate, strategist, organizer, provocateur, writer and professional colleague to staff, leadership and members. Nielsen has 2 grown daughters who he describes as the "center of my universe," is a long-time private pilot with an instrument rating, an avid USTA tennis player, bicyclist and hiker.

Nielsen describes his view of PCA as two-fold and embodied in the 2 pictures on his wall:

- PCA builds strong and lasting bridges with members, non-member DCs, health providers and key decision-makers such as the PA General Assembly (Harrisburg's Rockville Bridge, which is the longest stone masonry-arch railroad viaduct in the world).
- PCA is always advocating and training-up for the good fight, whether
  in Pennsylvania's capitol building, with Governors' administrations,
  health insurers, an often ill-informed media, and any/ all comers (oneof-a-kind –photo of Muhammad Ali in his Deer Lake training camp for
  his 1977 match with Ernie Shavers)

Ed's favorite quote to live by: "The world is what YOU make it. It all starts with what you make of yourself." ~ Fred Claus, 2007

#### Lindsay



Lindsay Walter joined the PCA in October 2016 and has been an integral part of the educational opportunities for the PCA. She collaborates with the CE Committee as well as the Annual Convention Committee in planning and organizing CE meetings and events throughout the year. Lindsay has a background in event management, primarily in the sports field, and enjoys utilizing her diversified skills to help bring educational content to DCs in PA. Her goal is to continue to help grow the profession by way of education so that patients can become pain free without having to resort to medication. In her free time, Lindsay enjoys running and hiking with her dog, Ellie, and she especially enjoys Sunday Fundays on her "yacht" with her fiancée Jeff.

Favorite Quote: "Don't measure yourself by what you have accomplished, but by what you should have accomplished with your ability" ~ John Wooden

Amanda



Amanda Mullen serves as PCA's Administrative guru. Amanda not only brings to the PCA her several years experience in office management but she has also served as a CA /billing coordinator for 3 years at a Harrisburg area Chiropractic office. This allows her to really understand PCA members' needs. Amanda's passion lies with Chiropractic and being a Chiropractic advocate to those who need educated - Your health is your greatest asset. In Amanda's free time, she enjoys kayaking, hiking, swimming, and relaxing by the campfire with her significant other and close friends.

Favorite moto to live by: ~ You only live once. Take care of yourself; live like it's your last day ~

Linda



Linda Smelser is your Membership / Finance Coordinator. She has been part of the PCA staff for just over a year now. This dual role allows Linda to do two things at work that she enjoys, customer service and accounting. This also reflects her home life as a mom, providing over the top customer service to her two kids (ages 12 and 14) and being the CFO, making ends meet with DIY projects and cooking from scratch (but no coupons, she believes they are all a scam!) After all that, there is always time for a good book!

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# Annual Convention 2017

October 21 - 22nd

**OUR SPEAKERS** 



Leonard Faye, DC

PA, MD, DE, NJ, OH) \*APPROVAL PENDING



Shane Steadman, DC



Dean DePice, DC





Louis Sportelli, DC



Karin Toner Pierce



Ty Talcott, DC



George Curry, DC



David Herd, DC

# Register Now

By registering today, you will lock in the \$99 CA/Staff rate.

Pay for yourself now - pay for your staff later!

"The Cervical Syndrome: Lecture and Practical Demonstrations and Coaching of Rational Manipulation of the Neck, Upper Thoracics, and the Shoulder Girdle" Sponsored by 8 Weeks to Wellness® (12 CE\*)

# **Dr. Leonard Faye**

This presentation will introduce the evidence based information about the therapeutic effects of cervical/thoracic manipulation that support our treatment of the Cervical Syndrome. CS is the result of Sympathetic Nervous System facilitation from Cervical Thoracic restrictions and hyper mobilities of joint function. Three hours of lecture on principles of manipulation, double diagnosis concepts, and treatment and prognosis of the CS, followed by 7 hours of Technique Lab relative. Doctors must bring one portable table for every 2 doctors. Please coordinate with a colleague or bring your own table. This will be necessary for the practical lab!

"Mastering Functional Blood Chemistry™: Case Studies and Integration-An Introduction" Sponsored by Apex Energetics™ (12 CE\*)

### Dr. Shane Steadman

This course is designed to provide the basic concepts of laboratory biomarkers to help recognize patterns of imbalances, to identify cases that may need to be referred for further consultation and/or evaluation, and for health maintenance (including dietary, lifestyle, and nutritional support). A review of human physiology will be followed by laboratory applications, differential diagnoses, and clinical applications. Upon completion of the seminar, attendees will be able to recognize patterns for cardiovascular risk, blood glucose imbalances, thyroid imbalances, immune imbalances, red blood cell imbalances, renal imbalances, and hepatic imbalances, as well as understand nutritional applications and recognize blood chemistry patterns for cases that need to be referred for further consultation and/or evaluation.

# "Aligned Continuing Education A.C.E. Program" Sponsored by TLC4Superteams (12 CE\*)

#### Dr. Dean DePice

A.C.E. Program draws together the most current research in science and philosophy the objective of which is to advance the doctors' impact upon patient outcomes through greater knowledge of chiropractic's safety, effectiveness and certainty in case management. This course clarifies, articulates and substantiates how the inseparability of science and philosophy is not a chiropractic debate or consideration but an indisputable part of advancing healthcare and comprehension regardless of healthcare specialty, discipline or personal position on such issues.

# "32 Practice Management Tips for Stress Free Practice Growth" (4 hrs, not CE)

#### **Karin Toner Pierce**

Since CA's wear different hats during the patient day, they will learn to adopt efficient tasks in the administrative role as well as how to educate your patients about their care. In addition, attendees will be provided with tips for helping your patients stay through their care plan and to refer their family/friends. CA's will learn how to assure full collections from insurance carriers and your patients. All of this and more, with every tip geared towards practice growth! Karin will have your assistants excited about their part in your patients healing and your practice growth. Chiropractic Assistants will return to the office Monday with simple solutions that bring really big results for your practice.

# "HIPAA & OIG Compliance for Chiropractic - Creating an A-Z HIPAA Program" (4 hrs, not CE)

#### Dr. Ty Talcott, CHPSE

Dr. Ty will give you everything you need to know to keep you and your practice compliant! You will learn how to meet HIPAA mandates to protect your patient health information including preparation for physical plant audits, risk analysis, ISAR's, contingency plan with data recovery and emergency mode operation, staff training requirements. You will also be informed on Medicare fraud and abuse and how to prevent it, including Ty's own "Seven required steps to an OIG compliance program". Ty will also touch on the new 1557 ACA law that went into effect October 16, 2016— and be sure you understand it and how it affects your practice.

# **SPEAKER PANEL:** Saturday @ 4:20pm (2 CE\*)

"Chiropractic Past, Present and Future: A Reflection on Chiropractic Progression and the Influence of Health Care on Chiropractic in the New Age"

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# **Michele** Quattlebaum, **Texas**

ff The thing that is so impressive about



NCMIC is primarily their claims department. Each and every claims representative understands your case. They believe in you.... This is not a side business for them. They are not a medical malpractice insurance company that might sell to some chiropractors. They are chiropractic.

# Joseph Fasi, **Florida**

fflt's easy to recommend NCMIC to chiropractors.

Over the years that I have worked with NCMIC, they've shown an intense loyalty to the people they insure. I firmly believe that NCMIC does not look at the people they insure as simply being another factor for income or another insured to add to the balance sheet.

# June Baker-Laird. Colorado



Why NCMIC? "We Take Care of Our Own."" Hear more from our retained attorneys at

www.ncmic.com/whyncmic Or call 800-769-2000, ext. 3120.



Continued from pg 10

## Third Party Administrators (TPAs)

PCA continues to work with the House Insurance Committee and Representative Eli Evankovich (R- Westmoreland) to develop language that will rein in the many heavy-handed excesses of health insurers' Third Party Administrators. The project for PCA this summer is to develop an amendment to an appropriate insurance bill that can pass muster when the legislature returns in the fall. Stay tuned.

# House Bills 346 & 788- Prohibiting Restrictive Covenants

PCA has been invited to offer language to amend these bills to assure that we are not creating competitive disadvantages to established Chiropractic practices. PCA argued that having some restrictive covenants actually helps new providers by giving assurances to established practices that providing a "foot in the door" for newly-minted DCs does not threaten their own practices. This allows for a collaborative venture that is beneficial to both established practices and new DCs.

## Any Willing Provider (House Bill 345)

Nothing new to report on "any willing provider" except to suggest that PCA continues to lead the charge. PCA continues to encourage Chiropractors to take advantage of the summer recess to meet

Despite clear anti-discrimination language in the ACA, Pennsylvania insurers appear to be engaging in practices that pay Chiropractors considerably less for the same service codes performed by physical therapists, orthopedic surgeons, or nurse practitioners.

with their own legislators to advance the cause.

Discussions with key staff are ongoing and we will report back with any progress.

# Fees, fines, and penalties to the General Fund

On another positive note, we have helped support legislation that would amend the PA Fiscal Code to require that all fees, fines, and penalties imposed by state agencies, departments, and boards be deposited in the General Fund. This will remove agencies' incentives to impose excessive fines and unnecessary fees on constituents and businesses throughout the state. This should help address a problem that some Chiropractors and other health care providers face when excessive fees, fines, and penalties are imposed.

# Legislation Regarding Photo Identification in Health Care Facilities

Representative Pam Snyder (D- Greene, Fayette, Washington) has introduced legislation dealing with photo identification badges for health care professionals. PCA worked to assure that badges are NOT required in private office settings. The original ID law and this proposal applies only to health care facilities like general and specialty care hospitals, home care agencies, hospices, and ambulatory surgical facilities.

# University of Pittsburgh Doctor of Chiropractic Program

A recent breakthrough: Representative Harry Readshaw (D- Allegheny), who is the Minority Chair of the Professional Licensure Committee, has agreed to introduce legislation with the appropriate language that would allow for Chiropractic students to participate in internships and related educational and learning experiences in PA DCs' offices. PCA has been working with Representative Readshaw's staff to correct this legislative oversight.

Mark Singel is the President of The Winter Group, a nonpartisan Harrisburg-based lobbying firm that represents the PCA in Harrisburg.



# 94 years, and "we" still have your backs! Remembering and Honoring the Roots of Chiropractic in Pennsylvania:

to the Secretar	y of the Commonwealth of Pennsylvania: MAR 28 1932
SIR:In compliance tration and protection of	with the reconfirements of an Act of the General Assembly o "he Commonwealth of Pennsylvania, entitled "An Act to provide for the reg- names, titles or designations of associations, societies, orders, foundations, federations, organizations and corporations of the first class,"
oproved the 16th day of 3	The Pannsylvania Society of Brugless Physicians, a
and the second s	proposed Corporation of the first-class
aving heretofore adopted	r used or desiring to adopt or use a
	said act, and desiring to register the same in the Office of the Secretary of the Commonwealth of Pennsylvania, do hereby certify:
1. That the nam	e, title or designation of the association, society, order, foundation, federation, organization, corporation of the first class
r proposed corporation	of the first class so registering is. The Pennsylvania Society of Drugless Physicians
2. Its address, k	ocation or place of business as 1425 Conlyn Street, Philadelphia, Pa.
3. The length of	time, if any, during which the said name, title or designation has been so used by applicant is perpetual

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