



CHIROPRACTIC NEWS & VIEWS

Presented by:
Hawaii State Chiropractic Association, Inc.

Volume XIV, March 2017

WHAT'S NEXT?



HI State Chiropractic Association
P.O. Box 22668
Honolulu, HI 96823-2668
Ph: (808) 926-8883 Fx: (808) 926-8884
www.HawaiiStateChiropracticAssociation.org

OFFICERS & ISLAND DIRECTORS

PRESIDENT

Dr. Joseph G. Morelli, Jr., DC

VICE PRESIDENT

Dr. Jesse Broderson, DC

SECRETARY

Dr. Randy R. Collins, DC

TREASURER

Dr. Brandon Kikuchi, DC

OAHU ISLAND DIRECTORS

Dr. Dean J. Shivvers, DC

Dr. Armando K. Garza, DC

EAST HAWAII ISLAND DIRECTOR

Dr. Robert Klein, DC

WEST HAWAII ISLAND DIRECTOR

Dr. Alfred Valenzuela, DC

MAUI, MOLOKAI & LANAI ISLAND DIRECTOR

Dr. James A. Pleiss, DC

KAUAI ISLAND DIRECTOR

Dr. Alice Holm Ogawa, DC

IMMEDIATE PAST PRESIDENT

Dr. Gary K. Saito, DC

**EVER CHANGING FEDERAL REGS....NEW PAYMENT
SCHEMES...NO MORE FEE FOR SERVICE...QUALITY
REPORTING...PATIENT CENTERED CARE...COMPLIANCE!**

PRESIDENT'S MESSAGE

Joseph G Morelli Jr DC FICC, HSCA President & ACA Hawaii Delegate

Aloha All:

As you can see by the cover of this newsletter, there is a lot to think about regarding how we may be practicing in the future.

We all are going to be facing more and more federal/state regulations, ever-creeping into our everyday business.

In Washington, DC and in state capitals across the country, as these laws and their regulations are promulgated, there is expectation of full compliance by all healthcare practitioners!

Often, they design these changes to be phased in over time, but the inevitability of adapting our individual practice model can be a very confusing and probably costly.

Most of these changes begin with programs that the governmental agencies have most control of...Medicare, Workers' Comp, and Accident & Injury Care. This eventually trickles down to group healthcare insurance plans and third-party healthcare coverage.

How does this happen? It all has to do with money! You guessed it, how we are paid. This is how regulations are most effective, by tying what we are supposed to do to the purse strings.

Often times, these programs begin as an idea to make things better and improve something that is considered lacking.

Take for example, Electronic Health Records. When this came on the scene some years ago, most people thought this was a good idea, save for the expense.

Now there is a way to put what a doctor does in all one place. An electronic way of documenting what he sees in the patient's presentation; what he believes is the problem; a course of action to take; centralization of the bookkeeping and billing process; quickly and efficiently getting it to the paying entity; and finally putting money in our pockets. On top of all that, it gives us a potential new way for our patients to have access to these records while adding an additional method of communication between the doctor and patient.

So, what was initially a good idea, is becoming more of an increasing burden of time spent with the EHR and can be taking away from patient face to face time.

Since I am kind of a "tech-geek", I try to keep up with all these things, especially when it has to do with technology end of things. I can tell you first hand, none of this is simple and straightforward. The unfortunate part of all this is, when we finally seem to get a handle on it all, they add something, or change something, or say from no on you have to do it this way!

This constant re-do of the requirements can be very frustrating. This being the case, the HSCA is trying to make available to you all the tools and information that we can facilitate to get you and your practice where it needs to be.

Please pay attention to future communications from HSCA. We will do our best to get the word out as the changes come down, and the resources to acquire the knowledge.

Speaking of Washington, DC, there is a fair amount of excitement in the ACA about 2 pieces of legislation it had introduced regarding Chiropractic.

The American Chiropractic Association has been working for many years to help get Chiropractic situated as an essential and necessary service in the American healthcare system.

One of the methods that has been very successful to date has been with Chiropractic integrating into the military medical system and the Veterans medical system.

As you know, DC's are in more and more military medical facilities and also in VA clinics across the country, and eventually overseas. This has been very fruitful for our profession, since DC's are working alongside MD/DO docs daily in multiple venues. You may also know, that a significant majority of medical residencies are now done in Military/VA facilities, as many of the civilian teaching hospitals and programs have shutdown.

The upside of this is that the newest members of the medical specialty community are exposed to Chiropractic during their training, so it becomes more of the norm when they are later in private practice to have their patients see Chiropractors and/or refer to our profession.

Now more and more, the medical establishment is seeing our abilities and expertise in treating these complicated neuromusculoskeletal conditions in their own clinics. The best part of this is that our outcomes are very good, without the reliance of opioid medications!

There is a major push in the healthcare industry to diminish the use of opioids and other serious addictive medications. This has left clinicians looking to other practitioners like Chiropractors and Acupuncturists.

(Please see another article below from the ACA applauding the American College of Physicians, on it's new "Low Back Pain Treatment Guidelines" that direct medical practitioners away from these medications, and to our clinics.)

Now, with the new administration in Washington, there have been pledges to significantly beef up the Military. Right along with this is all their support systems, including their healthcare system.

Taking advantage of this new thinking, the ACA has introduced 2 new pieces of legislation to ensure access to Chiropractic to the active duty military and their families, and to give greater access for Veterans once they leave active duty.

These bills have strong support on both sides of the aisle in Congress. If passed, this can be a boon to private practitioners like us here in Hawaii, considering all the military & retirees here.

If this goes through, all active duty & their dependents will have Chiropractic coverage in their Tricare insurance.

The other bill gives greater access to Veterans outside of VA facilities.

As the ACA Hawaii Delegate, I will be attending the ACA National Chiropractic Leadership Conference next week in Washington, DC. A big part of this program is a full court press where we lobby one on one with members of both the House & Senate. One of our prime agenda items are the 2 bills noted above.

We will also be putting in our 2 cents regarding the Republican plan to replace "ObamaCare". We will do what we can to emphasize Chiropractic is a necessary part of any future healthcare mandates that come out of the "repeal & replace" effort.

So far, it seems that there is a fair amount of bi-partisan support for this. But, with this new administration, no one knows what the final legislation will look like.

When I get back from DC, I will bring everyone up to date on any outcomes on these projects as information becomes more solid.

Please pay attention to future newsletters and email and/or webposts from the HSCA.

Please see the next article in this newsletter from the ACA Government Relations Department on the legislative effort.

Aloha,
Dr. JOE Morelli

LEGISLATION INTRODUCED IN U.S. CONGRESS TO FURTHER INTEGRATE DCs IN MILITARY, VA HEALTH CARE SYSTEMS

ACA Dept. of Govt. Relations

At the urging of the American Chiropractic Association (ACA), two new bipartisan bills were introduced in the U.S. Senate and House of Representatives to further incorporate doctors of chiropractic (DCs) in the nation's military and Department of Veterans Affairs (VA) health care systems.

Reps. Mike Rogers (R-Ala.) and Dave Loebsack (D-Iowa) introduced H.R. 802, bipartisan legislation that would provide TRICARE recipients with access to DCs, as well as services to manage pain and address neuromusculoskeletal disorders and related illnesses. Services provided by DCs are currently only available to active-duty troops at 60 military treatment facilities in the United States and at bases in Germany and Japan.

Congress needs to ensure that the services delivered by DCs are available to retirees, dependents and survivor beneficiaries in the military TRICARE system, a benefit that is now available to many in the private sector. This inequity has resulted in medically retired servicemen and women losing their chiropractic benefits immediately upon discharge.

Sens. Jerry Moran (R-Kan.) and Richard Blumenthal (D-Conn.) introduced S. 398, "The Chiropractic Care Available to All Veterans Act," a bill that would integrate the services of DCs at all major VA medical facilities over several years and codify chiropractic as a standard benefit for veterans accessing VA care. Although the VA currently provides access to a DC at just over 50 major VA treatment facilities within the country, a great number of America's eligible veterans continue to be denied access to chiropractic. The VA has no DCs on staff at a majority of the VA's health facilities and referrals to chiropractic services outside the VA system are rarely provided at these and other locations.

Congress should enact legislation to eliminate disparities in veterans' access to chiropractic services. Veterans deserve access to the essential services provided by doctors of chiropractic, especially since a great number of returning overseas veterans are suffering from musculoskeletal ailments. Who better to treat these brave men and women than chiropractic physicians?

According to ACA's Department of Government Relations, the 2017 National Chiropractic Leadership Conference (NCLC), March, 2017 in Washington, D.C., will serve as a major lobbying opportunity to build support for these bills. Additionally, all chiropractic physicians and students are encouraged to visit ACA's Legislative Action Center to directly contact their member of Congress ahead of NCLC 2017

and urge them to co-sponsor and support enactment of these bills.

AMERICAN COLLEGE OF PHYSICIANS NEW TX GUIDES *ACA News*

The American Chiropractic Association (ACA) applauds new Low Back Pain Treatment Guidelines by the American College of Physicians (ACP) that recommend first using non-invasive, non-drug treatments before resorting to drug therapies.

"The Chiropractic profession has long advocated for medical doctors and patients to use a more conservative approach to treating low back pain," said ACA President David A. Herd, DC. "These new guidelines by the American College of Physicians support a growing body of research as well as increasing recognition in the health care community regarding the value and effectiveness of non-drug approaches, such as spinal manipulation, for acute and chronic low back pain."

ACP's guidelines, published in the *Annals of Internal Medicine* and based on a review of randomized controlled trials and observational studies, cite heat therapy, massage, acupuncture and spinal manipulation (a centerpiece of chiropractic care) as possible first options for non-invasive, non-drug therapies for low back pain. Only when such treatments provide little or no relief, the guidelines state, should patients move on to medicines such as ibuprofen or muscle relaxants, which research indicates have limited pain-relief effects. According to the guidelines, prescription opioids should be a last resort for those suffering from low back pain, as the risk of addiction and overdose may outweigh the benefits.

THE NEW MEDICARE PAYMENT SCHEMES & YOU

As you may have heard by now, Medicare and eventually all 3rd party insurance plans are adopting different forms of physician reimbursement in place of "fee for service".

This all kicks in over the next several years in Medicare, and little by little in other coverages. These changes are the result of the Medicare and CHIP Reauthorization Act of 2015 (MACRA), which requires eligible providers to participate in a Quality Payment Program (QPP).

MACRA was designed to offer providers two new Medicare payment model pathways, collectively known as a QPP.

Eligible DCs can participate in the QPP by implementing the first model pathway, the Merit-Based Incentive Payment System (MIPS), into their practice. DCs are not currently eligible for participation in the second model pathway, the Advanced Alternative Payment Models, but this can change in the future.

The HSCA has sponsored a seminar in January, and a recent webinar laying out the various options related to this complicated decision making process.

CMS in Washington, has made available some training to help flesh out the choices.

The Centers for Medicare and Medicaid Services (CMS) launched new resources to assist providers of small practices in participating in the Quality Payment Program (QPP). Eleven organizations will provide free hands-on training and education. Additionally, as part of that outreach effort, CMS

launched a new telephone helpline. Clinicians can contact QPP at (866) 288-8292 or by emailing qpp@cms.hhs.gov. [Learn more](#). The HSCA points to the ACA website to view its: [MACRA and Quality Payment Program webpage](#): <http://www.acatoday.org/MACRA> to get more background information on these important changes.

====>>>>PRACTICE SEEKING ASSOCIATE<<<<====

VanQuaethem Chiropractic Maui
Immediate open for an Associate DC

PLACE: Beautiful Kaanapali, Maui, HI
NEEDED: Looking for a positive, professional and motivated Chiropractor to join a subluxation-based, family focused practice.

Salary: Competitive Percentage Offered
eMAIL: avgchiro@aol.com (Send Resume)
WEB: www.GetAdjustedMaui.com

====>>>>PRACTICE FOR SALE<<<<====

INFO: 35 yr. Established Practice, Reasonable Overhead
PLACE: Kaimuki-Kahala, Oahu Close to Freeway & mall
PRICE: Appraised at \$119K (Negotiable)
CALL: 808 737-8677, Dr. Randy Shibuya

====>>>>SEEKING OAHU ASSOCIATE POSITION<<<<====

INFO: HI Licensed, Recently re-located to Oahu for Husband's work.
CALL: (808) 495-1582, Dr. Madison Bell
EMail: dr.madisonbelldc@gmail.com

====>>>>DIGITAL X-RAY FOR SALE<<<<====

INFO: Pre-Owned 500mA Generator, Fixed Tube Stand Assembly, Receptor Camera, Computer with Acquisition software (Located on Oahu)
PRICE: \$22,000 o.b.o. (\$80,000+ when new)
eMAIL: drchris@hawaiiantel.net
CALL: 808-227-2541

====>>>>EAGER TO BUY HI PRACTICE<<<<====

Are You Ready to SELL?

INFO: Currently practice in Ireland will be in HI soon
Outright Purchase, no financing necessary,
Would like a transition phase.
Will Consider ALL practice/island locations
eMail: dougmeck@hotmail.com
CALL: Ireland +353-87-667-6669 (Dr. Doug Meckleborg)