

MEDICARE

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found that only 7% of Medicare beneficiaries had any "major access" problems in finding providers that would accept them.

Not so says the American Medical Association (AMA) which has cited data they collected to set the Medicare drop-out rate at a total of 45% of all MDs. According to the AMA news release, "In a recent AMA survey of 8,955 physicians, 60 percent reported that they would have to limit the number of new Medicare patients they treat due to next year's cut."

In terms of chiropractic participation, denied the opportunity to "opt-out" and privately contract for services with Medicare beneficiaries, ICA's Medicare Committee's poll of members has found a rapidly growing inclination among DCs to decline to accept Medicare patients. "This trend is hard to quantify and has certainly been aug-

mented by the nationwide campaign of post-payment audits and massive waves of claim denials for reasons of "medical necessity", said ICA Medicare Committee Chair Dr. Michael Hulsebus. "The difference between the GAO and AMA findings in terms of providers not taking Medicare payments if fee cuts continue is staggering, and you have to wonder who is being the most manipulative of the real situation. It is clear, however, that many of our chiropractic colleagues are seriously considering not taking any Medicare patients at all," said Dr. Hulsebus.

Congress Responds

With election year 2008 looming, and not wanting to have to deal at the last minute with the inevitable mess the proposed 10 percent Medicare fee cuts that will take effect next January will bring about, Congress has responded with the Children's Health and Medicare Preservation (CHAMP) Act. On August 2, 2007, The US House of Representatives voted 225-204 to ap-

prove CHAMP legislation, *HR 3162*, that would, among a host of other provisions, reduce payments to Medicare Advantage plans and increase the federal cigarette tax by 45 cents per pack, and set aside the programmed Medicare provider fee cuts for two years, offering in their place a very modest physician payment increase.

The US Senate is considering an alternative bill that would offer major additions to health coverage for children and other "vulnerable members of our national community" financed by a 61 cents cigarette tax increase, **but does not include action on proposed physician fee cuts.** ICA urges all US DCs to aggressively lobby their US Senators to approve the House-passed version of this vital legislation. While both House and Senate versions may eventually face a Presidential veto, the House approach has gained the support of the widest possible range of interests, from the AMA to the powerful senior citizens lobby, the American Association of Retired Persons (AARP).

What's Next for Chiropractic in Medicare

ICA's Medicare and Legislative Committees have always understood that the strength and health of the chiropractic portion of the Medicare program starts with the sound management of the program in its entirety. "Cutting back on Medicare Advantage costs and raising cigarette taxes can only make a slight and temporary difference in the future of Medicare," said ICA Legislative Committee Co-Chair Dr. Michael S. McLean. "As numbers of beneficiaries rise, reaching the 60 million-plus mark, major changes will need to be made, and in this process, chiropractic must mobilize and participate in the policy process as never before, both to protect our patients and our profession, but also because chiropractic has a unique contribution to the overall resolution of this growing crisis," said Dr. McLean.

Because of this awareness of the need for the chiropractic profession to come together to coordinate a sound political action and policy management plan, ICA's Board of Directors has embraced an initiative put forward by the Iowa Chiropractic Society (ICS) to convene a profession-wide "...consortium of national and state member organizations, educational institutions and other appropriate professional representatives. The purpose of this consortium would be to develop and implement a profession-wide plan of action that will result in the best possible legislative, public awareness and economic benefit for our profession."

The ICS initiative was prompted by the recently concluded Medicare Demonstration Project in which Medicare paid DCs for any Medicare covered service they were licensed to perform, within certain restrictions. In their letter to ICA, the ICS President Dr. Wayne Zemelka and Dr. K.R. Storjohann, ICS Chiropractic Demonstration Project Committee Chairman, wrote: "We believe the long-term overall future public utilization, professional stature, economic status, political influence, chiropractic college enrollment, and many other aspects of the chiropractic profession will be highly dependent on "Congressional Action" as a result of the current CMS Chiropractic Demonstration Project. This "Project" will in large part determine the course of our profession for many decades to come here in the United States. Chiropractic will either continue to progress socially, economically, educationally and politically, or begin a slide into health care antiquity."

"ICA respects and admires this frank, practical and problem-solving call to action from the Iowa Chiropractic Society," said ICA President Dr. John Maltby. "Not only will ICA answer the call, ICA urges all organizations to do likewise since this is not only a great and daunting challenge, it is also an historic opportunity to make a profound and powerful difference in the health of millions of our aging citizens, the social and economic health of the nation and the dignity and strength of the chiropractic profession. No individual or organization should fail to answer this clarion call," said Dr. Maltby.



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