

New Jersey Modifies Onerous Auto Insurance Law

DR. HALDEMAN'S TESTIMONY AND MERCY GUIDELINES RESPONSIBLE FOR INCREASED VISITS

Editorial Staff

When the New Jersey legislature wanted to rein in the every increasing cost of automobile insurance, their solution was to pass the Auto Insurance Cost Reduction Act on May 19, 1998. The new law established care paths that greatly restricted those injured in motor vehicle accidents from accessing chiropractic care. (See "Chiropractic America Files Lawsuit in New Jersey," *DC*, Dec. 14, 1998.)

Many doctors of chiropractic and chiropractic organizations testified to the deficiencies of the new care paths. Among those testifying was Scott Haldeman, DC, MD, PhD, of Santa Ana, California, a diplomate of the American Board of Neurology and Psychiatry (neurology), and commission chairman of the 1992 Mercy Center Consensus Conference. The document that was born of that conference was published in 1993 as the Guidelines for Chiropractic Quality Assurance and Practice Parameters, commonly referred to as the Mercy guidelines.

After considering the testimony, some of the care paths were modified in response to Dr. Haldeman's testimony and the backing of the Mercy guidelines. In a letter dated January 5, 1999, Jean Boucle, acting assistant commissioner of legislative and regulatory affairs for the New Jersey Department of Banking and Insurance wrote:

1. The opinions and recommendations of Dr. Scott Haldeman were considered. As referenced in the comments and responses, the department considered the Mercy Guidelines (document) which was partially authored by Dr. Haldeman.
2. Many of the specific provisions referenced in Dr. Haldeman's October 23, 1998 letter were adopted, in whole or in part. Specifically:
 1. The matter of the number of spinal manipulation treatments during the first 30 days was enlarged and clarified.
 2. Dr. Haldeman's opinion regarding isometric neck exercise and low stress aerobic exercise was recognized in the care paths upon adoption.
 3. The care paths specifically encourage the use of conservative therapy in the treatment of certain injuries which includes chiropractic care.
 4. The care paths, upon adoption, recognize the use of multiple injections of IM analgesic for cervical, thoracic and lumbar/sacral pain when necessary.
 5. Upon adoption, the care paths were amended to include consideration of spinal manipulation for lumbar disk herniation and radiculopathy.

While the New Jersey motor vehicle law and its care paths are still much too restrictive, the

new adoptions are a step in the right direction.

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