

CHIROPRACTIC (GENERAL)

We Get Letters

The Mercy Center Guidelines Are Coming Your Way

Dear Editor:

Thank you for your complete coverage of so many of the critical issues in chiropractic. I have been particularly interested in following the story of the Mercy Center Conference Guidelines. My question is: Where can I get a copy of the guidelines? They have been mentioned in many articles, but nowhere have I read how to obtain a copy. Are they only available to the elite of the profession, the schools, and the media? What about the practitioners whose very futures are being affected by the guidelines?

I thank you in advance for your help in this matter.

Kathleen M. Power, D.C. Pasadena, California

Editor's Note: While we've published the information on the distribution of the Mercy Center Guidelines in our May 8th and June 19th issues, it bears repeating, judging from the letters and phone calls we receive on this matter. The document, published by Aspen, will be distributed sometime in August to every DC in the U.S. free of charge, thanks to the donations of the following organizations:

NCMIC
Foot Levelers, Inc.
OUM Group
Leander Health Technologies
Activator Methods
Chiropractic Health Care Systems
Motion Palpation Institute
Synergy
Visual Odyssey

"Never before in the history of health care has one small group worked so hard, for so little, from so large a pot."

Dear Editor:

Dynamic Chiropractic, Vol. 10, No. 24, dated July 3, 1992 just arrived. Of course I started looking through it right away. On page 22 and 23 you have two very important articles.

Several months ago, I had complained to the ACA about the paucity of funds being paid to the chiropractic profession, and now you are running a very good article that brings it into focus. Based on the figures supplied to you by Dr. Street of the ICA, our 40,000 chiropractors receive, on

the average, only \$4,579.49 each year from Medicare.

I guess it costs me about \$2,000 each year in phone bills to Occidental to find out why they are not paying, why are they paying so late, why have they refused to accept recent x-rays on patients, and any number of other reasons we must call to ensure obtaining the \$4,579.49 each year. This gives me a Medicare profit of about \$2,000.49 for the year. Of course, this is not counting the cost of postage, envelopes, insurance forms, letters, computer time, cost of equipment to treat these people, cost of my help, and certainly drive me to drink.

Dr. Street lays it on the line. Of total Medicare fees, we get less than I/8th of one percent. This is such a disgustingly small amount I want to vomit. Never before in the history of health care has one small group worked so hard, for so little, from so large a pot.

What makes me doubly mad is that I know we have a number of chiropractors who are ripping off the system, and I am being painted by the same brush used for them. All insurance people think all chiropractors are making a million off of Medicare.

For all the doctors who are not members of either the ACA or the ICA, you had better start to worry. When you are less than 1/8th of one percent of anything, it can be cut off with no major repercussions.

Today, \$181,000,000 is small money in our government, but it sounds big in the press to the public. With one pen stroke, Medicare can save \$181,000,000 and the vast majority of people in America would not complain.

If we could only convince Medicare to restrict more of the high cost medical care, restrict some of the laboratory testing, and cut back on the "good ole boy" referral system to their buddies, we could get 50 treatments a year with less than a five percent reduction in dangerous medical procedures.

Don't ask me how to do it. I will help in any way possible, but we need our leaders to start working on this.

It galls me to have a patient denied care after about 15 visits when progress is being made on a very chronic case. Yet, they encourage these same people to go visit their medical doctor for dangerous and expensive drugs, surgery, and physical therapy. Something is wrong, somewhere, and I think it is in Washington.

Enough of that; let's move on. On the next page you have a very good story of just what drives this world. Greed! Your story about workmens' compensation abuses in Washington state shows just what kind of doctors are doing this. It's hard to believe a chiropractor could see a patient 900 times in four years. That sounds like daily visits for four years. What are the ethical beliefs or standards of these doctors? Then, to have the nerve to counter sue because the state never told them to stop being a pig.

I love this profession. We have the ability to do so much for people in pain. Yet, after being exposed to the crooks, pigs, con artists, scam men, and what not in our profession, I am thankful that I only have 120 days left before I retire. Our professional ethics are getting worse, not better, with time.

I have decided that when I retire, in between fishing and travel, I am going to do everything I can to expose the con artists and crooks of our profession, and keep harping to our national and state organizations and our state boards to do everything in their power to help clean up our act.

If more chiropractors had the guts to expose the doctors they know who are cheating the system, we could bring this problem under control. The problem is, nobody wants to be the squealer. Somehow, we have to change this.

John M. Du Bois D.C., DACBN Escondido, California

Head and Neck Pain

Dear Editor:

Your notice of a seminar on temporomandibular joint system's effect on head and neck pain is most timely, and I want to congratulate you on bringing this connection to the attention of the profession. For many years, I have been treating TMJ with success, but find that in many dentists, this information is unacceptable, nor do many chiropractors make the connection.

Further, I would like to congratulate you on your stress of palpation, as I assume that from the title of your organization.

J. K. Woodlee, D.C. Artesia, New Mexico

A Boondoggle by Any Other Name is Still a Mess

Dear Editor:

The last thing the American public needs is government-run national health insurance. Chiropractors should especially be against such a system which will probably adopt the "Medicare model" for chiropractic reimbursement.

The government should get out of the health care business and leave it to the private sector. Let's jump off the national health insurance bandwagon, as it will certainly be a health care boondoggle for the American public taxpayers.

Lets say no to national health insurance and avoid paying the taxes for a system which will be doomed for failure.

Frank P. Lanzisera, D.C. Brandenton, Florida

A Reminder

Dear Editor:

This is not much more than a letter of appreciation for the receipt of your publication over the past few years. I find it to be more readable than just about any other chiropractic publication. It seems to be part newspaper/part forum/part journal.

I will have you know that I prefer an emphasis on holistic health in general, rather than on chiropractic exclusively, and definitely not on the "medical model" paradigm, though the schools, and many practitioners seem to be bending in that direction, to the severe detriment of our profession. A recent radiographic analysis by one of your columnists, ending with the advice that one consult the American Cancer Society, caused me to almost lose my lunch. Some of the published studies need to be more lively. Many today have not learned the lesson that methodological soundness need not imply sterility.

The loss of Dr. Felix Mendelsohn was indeed a a terrific loss to "DC," as well as to health community in general. Let us welcome others of like philosophy to share their ideas, experiences, and energy.

We need, in my estimation, to remind ourselves constantly that we are primary health care providers and physicians, holistic and chiropractic. Some of our laws -- including that of California - forbid the use of the word "physician" by doctors of chiropractic, but that reflects no more than the fact of our accepting less than perfect compromises under pressure from the medical establishment. We must remedy this by altering or deleting those offensive passages immediately, if we are to maintain our self respect as doctors.

Thomas Halle, D.C. Los Angeles, California

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