

## Hennie Penny -- The Sky is Falling

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We have been hearing so many negatives about chiropractic and its relationship with the insurance industry that most will turn a deaf ear when I say the chiropractic profession is on the brink of impending disaster. The dangers encompass three issues:

1. Serious threats from outside forces to eliminate chiropractic coverage from third-party reimbursements (what we know as insurance equality laws or mandated benefits).
2. Rampant overutilizations.
3. Blatant indifference to the problems at hand.

I regret to say that these statements are verifiable and, therefore, not based on opinions or probabilities.

Several months ago the honorable Douglas L. Wilder, governor of the state of Virginia appointed me to the Special Advisory Committee on Mandated Health Insurance Benefits. The charge of this commission is to advise the governor and general assembly on the social and financial impact of current and proposed mandated benefits and providers. "Mandated benefits" is another phrase for what the chiropractic profession has termed insurance equality laws.

My practice began prior to the insurance equality laws, therefore I have been on both sides of the fence. Since that time, hard fought battles to gain recognition for our profession have been won through legislation. One significant victory may be seen in the increase of young people choosing chiropractic as their profession. The newcomers are a credit to us. Most have gone far in a short time. Their fast climb up the financial ladder, however, is due in large measure to a prerequisite they take for granted -- mandated benefits. Naturally, they look upon insurance benefits as an expected part of their professional life. Their experiences show them nothing to the contrary, and, from their point of view, losing this prerequisite is not a reality.

Astute chiropractors with a keen eye on current trends in legislation see danger in the growing indifferent, nonchalant attitudes invading our membership. Building and maintaining a practice without the assistance of health care insurance for patients has taught some of us a lesson. Those who have not passed through this school of hard knocks should understand that indifference will not exempt them from the terror of watching their patient load dwindle. Visions of patients paying fees of \$60 to \$300 per visit, three times a week for several months, from their own pocket is pure fantasy. Even the most loyal patients will go where their insurance is honored. Home mortgages, car payments, country club dues, college tuitions, and other financial drains will affect their choices for health care services.

For those still unconvinced of the potential pitfalls facing the future of chiropractic, I suggest they turn their attention to recent changes in insurance regulations in the states of Oregon and

Washington. There, change has resulted in a direct loss of income for the chiropractic practitioner.

Also opposing mandated benefits, the United States Chamber of Commerce waves another red flag before us. The chamber considers its opposition to be a protective measure for the small businesses unable to meet exorbitant costs of health care insurance for their employees, now required by law. Using the same rationale, the state of Virginia recently passed a law giving Blue Cross/Blue Shield the right to design and to offer a "bare bones" (mandated benefits excluded) policy. Only 19 percent of all employees are in non-self-funded plans. With that in mind think about what happens if the insurers use the ERISA shield on chiropractic. What happens if the insurance industry in Florida prevails in its lawsuit over the constitutionality of the chiropractic insurance reimbursement law?

To avoid continued doubt about the gravity of our situation, I encourage all practitioners to read (even reread) ACA/FYI, March 1991, page 9, article titled, "New Federal Preemption on Minimum Benefit Laws a Live Issue." Senators Edward Kennedy and Don Reigle sit on a blue ribbon committee which expects to unveil a health care reform proposal this spring (readers should note the timing, "this spring"). "The driving force behind this proposal," says Richard Miller, American Chiropractic Association (ACA) director of Governmental Relations, "is the desire, on behalf of Congress and certain interest groups, to expand access to health care and contain cost by promoting 'bare bones' (mandated benefits) health care coverage." Recommendations from this committee, according to Paul T. Kelly, ACA assistant director of Governmental Relations, "... are expected to carry significant weight in the debate over the future health care in this country."

My work with health care planning, the Council for Chiropractic Education (CCE), the Medical Board of the state of Virginia, and the governor's Special Advisory Commission has given me cause to understand a reason for the increasing agitation against mandated benefits. The insurance industry uses statistics showing that mandated benefits cost as much as 22 percent for each policy holder. This makes mandated benefits a very visible target. The irrefutable proof is seen in numerous insurance claims I have read for outrageous charges ranging from \$18,000 to \$27,000 for strain/sprain cases.

Only the uninformed and/or unethical could expect to get away with such poor judgement. Let it be known that schemes designed to pad one's personal financial coffers will self-destruct. Insurance companies can retrieve any practice profile with the touch of a button; technology, in this case, can become the unwanted intruder for the dishonest and the uninformed.

Do you think it is by chance that 13 states have created commissions to look at mandates. It is my opinion that eliminating mandated benefits is the primary objective of these commissions. Chiropractic is on the hit list.

Those of you that are outraged about the IME done on your patients, the paper reviews, the requests for your office notes, and increased overhead from the overload of paper work will get relief if we continue to follow our present courses. Relief will come in the form of no chiropractic benefits paid in health care plans.

Twenty-five years of participation on various committees, boards, and commissions has led me to believe that a majority of our practitioners are unaware of the crises facing the chiropractic profession.

The conclusions I draw about our situation are simple, the recommendations are not:

1. Indifference, complacency, and greed weaken our prestige and influence.

2. Overutilization impedes our progress and threatens the viability of our future.
3. An informed membership is essential.
4. Active involvement in efforts to eradicate or lessen serious issues related to the current crises is the responsibility of every chiropractic practitioner.

We are the architects of our profession, and as a professional group, we determine our future. There is work for everyone; some should study and do research; some should interpret facts in clear terms -- with our membership and for lay people; some should speak publicly; and some should write. Still others should sit on commissions, serve on committees, and sacrifice income while out of the office. An appropriate label for our concerted efforts could be, "Project A United Front."

I pray that the ACA and the International Chiropractors Association (ICA) take action. We cannot wait for committees to study the problem for years. In the words of the great German author Goethe, "What you think you can do or dream you can do, start doing it. Boldness has genius, power, and magic in it."

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MAY 1991