

## We Get Letters & E-Mail

Don't Let the Insurance Carriers Drive Away From the Pump

Dear Editor:

When you pump gas at your local gas station, you've probably noticed the stickers that appear on the pumps in most states now. You know, the ones that say filling up and driving off without paying is a crime and that violators will be prosecuted to the fullest extent of the law. The stickers typically display a state trooper with a stern look on his face. He looks like he will slap the cuffs on you before you can get the car in gear.

I was looking at one of these stickers the other day and thought to myself, *the gas companies must have good lobbyist to have gotten this law enacted*. For most businesses that have merchandise stolen, the crime falls under shoplifting or theft. Apparently the gas companies have their own special law for these situations.

It is a shame that businesses that are service-based do not have equivalent laws. People who do not pay for services are subject to civil and not criminal laws. Business owners have to sue in civil court to recover fees for lost services. Unpaid services cannot be written off the business owner's taxes. Stolen merchandise can be written off for the amount the business owner paid for it.

In the health care world, where the majority of business is service-based, providers are faced with nonpayment of services on a regular basis. Some of the losses are the patients' responsibility. However, the insurance companies are the ones driving away from the pump. Health care reimbursements have become a joke. Insurance companies are pocketing billions at patients' and health care providers' expense.

The cry these days that health care insurance is not affordable for the average American is almost always followed with the blaming of health care providers. This occurs while insurance companies remain exempt from federal antitrust laws that would prevent them from price fixing. They continuously increase premiums while lowering reimbursements and/or denying reimbursement for needed care. The antitrust exemption is essentially a get-out-of-jail-free card for driving away from the pump.

Insurance companies created the need for the [Health Insurance Portability and Accountability Act \(HIPAA\)](#), enacted to protect patient privacy. Their antitrust exemption also allows them to freely distribute patients' health information. Yet the responsibility for HIPAA compliance has fallen on health care providers. These situations are not likely to change considering the antitrust exemptions and the insurance industry's strong lobby.

Adding insult to injury is the insurance industry's repeated attacks on the chiropractic profession. Lower reimbursement is coupled with postpayment audits, improper repayment demands and claims of chiropractic care not being cost-effective.

Fortunately, these problems are being addressed as we speak. Chiropractic organizations in New York, New Jersey and Pennsylvania have acted by filing class-action suits against major insurers for

unfair reimbursements and postpayment audits. Congress is moving to remove insurers' exemption from the antitrust laws for their failure to cooperate with national health care reform. (This may or may not work, depending on the seriousness of Congress' intentions. It may simply be a threat to gain leverage.) [And a recently released study](#) by Niteesh Choudhry, MD, PhD, of Harvard Medical School and Arnold Milstein of Mercer Health and Benefits provides evidence that chiropractic is one of the most cost-efficient forms of health care available to the American public.

These efforts and results should be broadcast to every American. What can you do to further the cause? What you *can* do is what you *should* do. Join your state and national organizations. Join the [Foundation for Chiropractic Progress](#). Never before have we had an organization like the foundation. It clearly represents the best chance we have had to date for getting the word out about chiropractic and getting the attention of the people we need to reach in Washington.

The foundation, Foot Levelers and Standard Process recently supplied thousands of chiropractors with office displays and forms to get patients involved in keeping their chiropractic health benefits. [Read "Watch My Back Campaign Begins" [in the Oct. 7 issue of DC](#) for more information.] Use the materials and back their efforts. Get your patients involved. Stop the insurance carriers from driving away from the pump.

*K. Jeffrey Miller, DC, DABCO  
Roanoke, Va.*

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## Abusing the Concept of "Wellness"

Dear Editor:

In response to Dr. Christopher Kent's "[Chiropractic: A Glorious Future](#)" [Nov. 18, 2009 *DC*], I appreciate the promotion of "wellness" within chiropractic, but I continue to cringe when I see a "Chiropractic and Wellness" center in my area. Unfortunately, "wellness" is a concept that has been as much mutated by our profession as it has been by mainstream medicine.

Wellness does not mean getting adjusted three times a week for the rest of your life. Chiropractic care is still an intervention. As much as some in our profession promote healing from above, these same practitioners seem unable to let a patient go without some type of regular care. It's no different than thinking every newborn needs to be adjusted out of the womb. That would assume that every baby is born needing an intervention, and would suggest that Mother Nature or a higher power or whatever you choose to believe in created us with a flaw that needs fixing right out of the womb. Now some do as a result of difficult births, but every baby?

Furthermore, I can accept that chiropractic adjusting has non-NMS effects, but how strong are they? I've had patients improve their GI function with adjusting, but I'd never rely on adjusting over lifestyle changes and functional medicine to improve my patients' GI function.

And how many of our colleagues will see a patient 30 times to correct a cervical curve to lower the risk of arthritic changes (no confirmatory studies), but will never once in this course of treatment discuss lifestyle changes to lower risk of cardiovascular disease (even though there are numerous clinical studies relating CVD to degenerative disc disease)?

This is contradictory in my eyes and does no true service to the patient. And it is likely that these lifestyle changes will more greatly affect the progression to DDD than restoring a cervical curve and lower the risk of every other chronic disease.

I firmly agree that our profession is the only profession that can respond to the health care disaster we have in this country. But it is not because we have adjustments as a tool, but rather because we realize that disease comes from within, caused by factors almost entirely within our control.

Applying the responsibility for our country's health firmly on the shoulders of our patients, educating about diet, exercise, stress and environmental exposures, is the only fix for this health care system. In the meantime, mainstream medicine continues to perpetuate vaccinations, mammograms of questionable efficacy and colonoscopies as "prevention."

*James Bogash, DC  
Mesa, Ariz.*

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Cost-Effectiveness Driven by Evidence-Based, Patient-Centered Care

Dear Editor:

[Nice front-page article](#) ["How Chiropractic Helps the Insurance Industry; Report Suggests Covering Chiropractic Care of Neck and Low Back Pain Increases Value for Dollar of Health Benefit Plans," Dec. 2 issue]. My only addendum would be that chiropractic offers its cost-effectiveness when it is rendered by an evidence-based, patient-centered chiropractor. Chiropractic is not necessarily cost-effective if the insured member is treated by a provider who is financially driven, rather than patient centered. It has been my experience that doctors whose office goals are patient visit averages or ever-increasing monthly collection figures are not cost-effective and offer no better outcomes for their patients.

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*Dynamic Chiropractic* encourages letters to the editor to discuss any issue relevant to the profession, including response to articles that appeared in a previous issue of the publication. All letters should be e-mailed to [editorial@mpamedia.com](mailto:editorial@mpamedia.com) with "Letter to the Editor" in the subject field. Submission represents acknowledgement that your letter may appear in a future issue of *DC*, but does not guarantee publication. We receive considerable correspondence and endeavor to publish as many perspectives as possible

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