



Opening Minds, Hands, & Hearts

Chiropractic Success Systems™
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SPRING WORKSHOP SCHEDULE

All seminars will be on Tuesdays, and will be held at the San Ramon Marriott.

Practice Building Basics

Tuesday, April 27, 2004 9:00-4:30

Insurance Billing Basics

Tuesday, May 11, 2004 8:30-5:30

Cash Basics & Advanced Collections

Tuesday, May 18, 2004 9:00-4:00

Codes, Fees & EOBs

Tuesday, April 20, 2004 9:00-1:00

OR

Tuesday, June 1, 2004 9:00-1:00

*Dates, times, and locations are subject to change without notice.

GENERAL ANNOUNCEMENTS

If you are getting this newsletter by email, I will be removing you from my fax list. I will use email for seminar reminders. If you wish to be removed from this service, please email with "REMOVE" in the subject area. If you wish to send me other information by email please send it to me at: Lisa_Bilodeau@hotmail.com.

Spring is here and winter was a doozie! There is so much to tell you that I hardly know where to start.

MEDICARE

Any fee schedules that you received prior to 1/1/04 are incorrect. Medicare fees were published towards the end of 2003 with a decrease, and then republished in January with a raise. So bottom line—shred anything from 2003 and use the fees published in 2004. They can be found at www.medicarenhic.com.

Many of you have already received requests from Medicare requesting additional information before they can process claims. You MUST read the "Chiropractic Services Billing Guide" which was published in July of 2003. It will tell you everything you need to know!!! Do it right and no problem, do it wrong and you guessed it... problems. This guide can be found the website listed above.

WORKERS' COMPENSATION

• Once again any fees schedules you have that were printed prior to 1/1/04 MUST be shredded. Some organizations published lists that had a straight 5% reduction, and are incorrect. Some prices did not change, some did, and those that did were in some cases, less than 5%. For a complete listing of correct and current fees go to www.dir.ca.gov/dwc and look under "Announcements". You are looking for "Table A".

• If you've received letters from any Work Comp carrier stating that they are limiting the number of visits for patients who were injured PRIOR to 1/1/04, the CCA needs copies of these NOW! Please send them to me by fax (831) 438-3161.

• All bills should now be submitted on the CMS-1500 form. What is the CMS-1500 form? It is the same red form that you have been using since the early 90s and up until recently it was referred to as the HCFA-1500 form. Why the change? Because the agency formerly known as the Health Care Financing Administration (HCFA) changed its name to the Centers for Medicare and Medicaid Services (CMS), and it is their form.

• The ACOEM Guidelines are being using officially as of 3/22/04. If you have not purchased the current 2004 version you need to purchase it immediately. You can go to www.acoem.com to purchase it from OEM Press.

• CPT code 97026 is defined as, "a modality which uses light and heat to raise the tissue temperature 5 to 10 degrees centigrade in the area of application". If you are using this code for a hot pack (97010) you must be using both heat and light.

HCPCS

The E0943 code for cervical pillows has been deleted and has been replaced with E0190 Positioning cushion/pillow/wedge, any shape or size. A9999 miscellaneous DME supply or accessory, not otherwise specified has been added.

ICD-9

I have had several calls from offices stating that insurance carriers are telling them that the diagnoses are incomplete, or not compliant with HIPAA standards. What this means is that many codes now require a 5th digit, and without it the claim can not be processed. If you purchase an ICD-9 book, I recommend you purchase the full version NOT a "chiropractic" version, which is very limiting.

PRACTICE TIP

Do you ever wonder what happened to a patient you haven't seen in a while, knowing you told them when you wanted to see them for a follow-up appointment? Doctors are telling their patient in the adjusting room when they want to see them again, but when the patient checks out with the front desk, the C.A.s says something like this, "When do you want to come back?" or better yet "When do you want to see the doctor?" In many instances the reply is not what the doctor told the patient, and the C.A. becomes doctor and not knowing any better says "okay".

Solution: Doctor, you MUST have a place on the travel/treatment card or routing slip that states specifically when you want to see the patient again. There is no need to come out to the front desk to tell the C.A.!!!! Keep the healing energy going and move on to the next patient and let your team handle the rest. C.A.s, when the patient returns to the front desk, you will look the patient in the eyes and using your script say, "You will need to see the doctor (time indicated by the doctor)." Use your close-ended statements and if the patient says they cannot, then escort them back to the adjusting room where the doctor can discuss it with the patient.

