



*Opening Minds, Hands, & Hearts*

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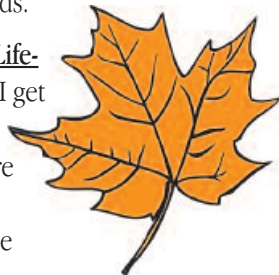


## GENERAL ANNOUNCEMENTS

• **Seminars/Training:** I will not be offering any more public seminars until the end of January 2005. If you need training, I am available to come to your office to conduct private one-on-one training. This way we can focus on your specific needs.

• **Spa Day at Life-West:** Lucky me, I get to spend 1 hour covering Medicare on October 21, 2004. Hope to see you there.

• **Web-site:** Our web-site is now officially up. You can find out when the next seminars are, get a registration form, order books and floppies, and find much more information on our products and services. Please visit us at [www.chiropracticsuccesssystems.com](http://www.chiropracticsuccesssystems.com).



The year is coming to a close and we are again being hit with more changes in the Workers' Compensation and Medicare arena. Patience is a virtue!

## WORKERS' COMPENSATION

• **Pre-designated Physicians:** Patients can still designate you as their treating physician under LC 4601. Be sure to have established patients sign the Pre-designated Physician form and mail a copy to the employer so that in case they are injured on the job they can come to you for care.

• **Fee Schedule Changes:** There have been some more changes to the California Official Medical Fee Schedule. These changes are for services on or after July 1, 2004. They decreased the fees for the 99201 and 99211, but increased many of the Physical Medicine procedures. For a full list go to [www.dir.ca.gov/dwc](http://www.dir.ca.gov/dwc). You are looking for the July 1, 2004 version of Table A.

• **DWC-1:** The new DWC-1 Workers' Compensation Claim Form & Notice of Potential Eligibility form has been released. You can get a copy at the web-site mentioned above and review it. It has a nice summary of benefits for injured workers on the first and second pages. I called the WCAB in Salinas to get a 4 part NCR version but they said they were just using the one off the Internet.

## MEDICARE

• **Chiropractic Service Billing Guide:** They have once again revised it and the latest version was published in August of 2004. You can get a copy from their web-site, [www.medicarenhic.com](http://www.medicarenhic.com). They have also published revised guides for Medicare as the Secondary Payer and Proper Completion of the CMS-1500 form, and the Standard Paper Remittance (SPR) Advice Notice. The last item explains how to read your EOMB (Explanation of Medicare Benefits). What do all those codes mean?

• All claims for services 98940, 98941, 98942 which do not have the AT modifier

attached to them as of October 1, 2004, will be DENIED as maintenance. When you provide acute or chronic active/corrective treatments to Medicare patients, you MUST add the AT modifier to every one of your claims that use the above mentioned codes. If you don't add this modifier, your care will be considered maintenance therapy and will be denied because maintenance chiropractic is not medically reasonable or necessary under Medicare. Be aware that your claims will continue to be autodenied if the services exceed the frequency limits of reasonable and necessary services specified in the LCD.

• **2005 Fees:** Once again Medicare has stated that they will be sending you your 2005 fees on a CD by mail. Of course you can still find them at their web-site, [www.medicarenhic.com](http://www.medicarenhic.com).

## PERSONAL INJURY

**Attorney Liens:** At several seminars that I have attended over the past year I heard both attorneys and other instructors advise us to begin collecting a small co-pay from the each patient that is being seen on a lien only basis. Not only does this reduce the balance but it is also their commitment to care. As Shawn Steele said without it you are most likely going to be running a "free clinic".

## PRACTICE TIP

I have had quite a few phone calls regarding how long you must keep patient records. The State Board of California states 5 years from the date last seen. However, HIPAA states seven years and because it's law is stronger than the State Board, you must keep them for seven years. Patient billing records including EOBs are part of their permanent records and should be kept with the patient file.

