

Garcia, Ana (DPL)

To: York, Sheila (DPL)
Subject: RE: Public meeting executive order 562

From: Drbones911 [mailto:drbones911@chiro.org]
Sent: Friday, June 05, 2015 11:20 AM
To: Termine, Joann (DPL)
Subject: Public meeting executive order 562

I would like to thank the Chiropractic Board for taking the time to listen to the public comments on Thursday June 4, 2015. Due to time limitations, each person had only 5 minutes to present their information and there was no time to discuss the suggestions in detail.

I would like to add some additional information regarding my suggestion to amend the policy #09-002 "Policy guideline on the performance of chiropractic supportive procedures and therapies by unlicensed assistants." **Specifically, to remove the words: "during the same patient visit".**

The stated mission of the Chiropractic board of registration is "To protect the public health, safety and welfare...". It is not on the boards stated mission to be involved in billing or coding disputes between a doctor and an insurance company. As mentioned at the public meeting, a **pre-therapy assessment is not a safety issue**. It is applied by the trained Chiropractic assistant and is already part of the treatment plan created during the examination or re-examination. The FDA has already allowed the public to purchase and apply most of these therapies without a prescription and certainly without the need for a pre-therapy assessment by a licensed doctor.

Consider the following: Is it the Chiropractic Board that should be answering the following questions or would it be more appropriate for federal CPT coding experts and/or the Massachusetts court system be answering the following questions?

1: Does a **particular CPT code require a pre-therapy assessment on the same day** immediately before the application of that therapy and what must that pre-therapy assessment include for payment? Who pays for that assessment? Does the code include that service in the payment calculations? How was that re-imburement rate calculated? Is a reasonable, appropriate treatment plan on a prior visit by the licensed Chiropractor adequate for a trained health care professional to apply that therapy, **if there are no contra-indications** to the application of that therapy?

2: Must a pre-therapy assessment be performed only by the licensed Chiropractor or is a trained, certified health care assistant capable of providing this service? Can this very low complexity service be delegated?

These sorts of questions could go on and on to include whether or not a **post-therapy assessment is required?** If not, why not? By who etc.

It is my opinion that none of these questions should be a matter for the Chiropractic Board. The legal process exists to confront these questions if need be. National coding experts can decide these matters as well as the Massachusetts court system.

The board should only be involved if there is a question of public safety and or competency of the treating Chiropractor.

Leaving the words, "during the same patient visit" in section one of policy #09-002 potentially interjects the chiropractic board into a coding/non-safety issue and may ultimately be in direct opposition to federal coding or state law. Please remove the words "during the same visit" from this policy.

Thank you,

Philip Barron DC, DACAN

If a board member has questions or concerns about implementing this minor amendment please feel free to call me.

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