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Chiropractic Summit Issues Urgent Call to Action

Interview with Lewis Bazakos, DC

Lewis Bazakos, DC, is chairman of The Chiropractic Summit, the coordinating body through which representatives of the major U.S. chiropractic organizations are working together to organize the profession's response to Medicare reform and national health reform.

When Summit I convened in September 2007, there were 13 participating organizations, including the American Chiropractic Association (ACA), the International Chiropractors Association (ICA), the Congress of Chiropractic State Associations (COCSA) and the Association of Chiropractic Colleges. By the time Summit V met in Washington, in May 2009, 40 organizations had joined the effort.

The Summit is asking all chiropractors to urge their patients and all other friends of the profession to sign up at one of two sites: the ACA's www.chirovoice.com or the ICA's www.adjustthevote.com so that when the moment comes, millions of Americans across the nation can simultaneously contact their senators and members of Congress to urge full inclusion of essential chiropractic services in health reform.

Dr. Bazakos practices in Valley Stream, New York. Aside from his work as chairman of the Chiropractic Summit, he is a past president of the New York State Chiropractic Association, past chair of the New York Chiropractic College Board of Trustees, past chair of the ACA Board of Governors, and current chair of the ACA Legislative Commission.

The Chiropractic Summit is the coordinating body for the chiropractic profession's efforts to positively influence the health reform process. What groups are part of the Summit and are they working well together?

The Summit is a historic meeting that was born out of the American Chiropractic Association, through a survey of the profession that was commissioned by ACA through the Foundation for Chiropractic Education and Research. The survey demonstrated that the profession, the rank-and-file docs, wanted to see the profession working together. From that, the ACA formulated Summit I, which took place in September 2007. There were 13 organizations – associations, colleges, vendors, and regulatory bodies – at the table. It was determined at that meeting that national health care reform and Medicare reform would be the critical issues facing the profession in the near future and that is what we should focus on.

By the second Summit meeting (Feb 2008), we had 23 organizations. At Summit III (August 2008), we had 32 organizations present. At Summit IV, in January 2009, we had grown to 39 organizations. As of the Summit V meeting in Washington, in May 2009, we now have 40 organizations.

The Summit represents the leadership in the profession. We have pretty much all of the colleges on board. The ACC [Association of Chiropractic Colleges] is part of the steering committee, as is the ICA, the ACA and COCSA, which is the Congress of Chiropractic State Associations. As far as working together well, I can tell you that every vote that has been taken has been unanimous. There have been no dissenting votes.

Why should chiropractors and chiropractic students pay attention to legislative issues?

They need to pay attention to it because it determines their future.

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In what ways?

It can impact their practice rights. It can have an effect on them being able to expand their scope of practice in the eyes of the federal government, and things do flow from there. You also have to preserve what you already have because insurance carriers are always looking to further erode it. Not only them, but also competing professions such as physical therapists. People are vying for the same piece of the pie, to a large degree. So you want to protect what is yours and try to expand that if you can.

What is the most important action for chiropractors, chiropractic students, and chiropractic patients to take between now and the October 2009 date by which Congress and the president have said health reform will be enacted? What should people who care about chiropractic do to bring about the best possible outcome?

The best thing we can do right now is to build a patient database. Our government relations people, who are representative of the ACA, ICA and ACC, are telling us that *we are going to need to demonstrate the public's desire to have chiropractic services*. And that we're not going to be able to do that with 100,000 or 500,000 people. We're going to need *millions* of patients advocating, telling their legislators that they want to see chiropractic included in any type of health care reform that comes out of the federal government. To that end, the ACA and the ICA have formed Chirovoice (www.chirovoice.org) and Adjust The Vote (www.adjustthevote.org), where one can log on and get their patients registered into this database that is being built by both of those organizations, so that when the time comes and we need to push the button, we can get all of these people activated.

What is the best possible outcome for chiropractic in the health reform process, including not only laws that might be passed this year but also later rule-making by the executive branch, which determines how to carry out those laws?

I think the best case scenario for us would be to be included in any reform plan, at parity with other health care professions, so that we can receive payment for all that we do. Right now, we can't. One of the big goals is to not only be included but to also get paid for what we do, for once and for all.

Aside from the White Paper recently released by the Chiropractic Summit, which provides substantial detail as to why chiropractic should be included in health reform legislation, does the Summit have a brief capsule statement on the profession's key aims?

Yes. We are asking that essential chiropractic services be included as a covered benefit under any national reform plan; that every patient should have the right to choose and be reimbursed for all health care services from doctors of chiropractic without barriers and limitations that unfairly restrict their freedom of choice; and that there be no MD-referral requirement for patients to obtain access to chiropractic care.

You've explained what the best possible outcome would be in health reform. Regarding possible negative outcomes, what are we particularly trying to avoid?

What we're trying to avoid, first and foremost, is being excluded. One thing that is not going to help us is the recent report from the Office of the Inspector General (OIG), which said that our profession is insufficient when it comes to proper documentation. That will come back to bite us. There are a number of key legislators – Senator Grassley (R-IA), Senator Harkin (D-IA) – that are friends of the profession and are trying to help us through this process. But then you have other people in government who sit and look at the documentation issue and will say, "Hey, you guys

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are looking for inclusion or expansion and you don't even know how to document properly. How do you expect me to say this profession belongs in the loop?" It makes it tough on them. So that's something that we have to correct because it's going to work against us.

In addition, you have other health care professions – medicine, osteopathy, physical therapy – competing for a similar piece of the pie. And you have other providers out there now who say they do manipulation. They may not do it for the same reasons that chiropractors do it, but they're going to claim that they do it. So an insurance company can turn around and say that they are providing that service, but it's just not going to be provided by a DC. It may be provided by a physiatrist or a physical therapist. So those are the types of things that we need to be careful not to fall victim to. We have to be sure that we stay in the game, and that's going to take a huge effort. It's going to require pooling resources across organizational boundaries. That's the only way it's going to happen for us.

Looking back to past legislative efforts by chiropractors (inclusion in Medicare in 1973, inclusion in the Veterans Administration and Department of Defense programs around the turn of the 21st century, and stopping federal legislation such as S.B. 1955 that would have eliminated state insurance equality laws), what lessons have we learned that are most relevant to the current situation?

When you look at the VA, the DOD and the stopping of 1955, the profession was working together on them, but not to the degree that it is now. We've also worked together on some other issues that have come up, such as efforts by insurance companies to restrict chiropractors from providing services to children. So when then profession works together and is aggressive, good things can happen. I know that we as a profession have a strong presence on Capitol Hill that is respected. And I think that maintaining that is what is going to work best for everybody. This is a strength that can help us greatly going forward. On the VA, the DOD and 1955, when we came together we were successful.

Are there ways that the mountain we have to climb with the current health reform effort differs from those past efforts in which we were eventually successful?

Yes, because you have the federal government trying to give insurance to every citizen in this country. And to do that, it's going to cost a lot of money. Basically, we hear stories that the federal government is bankrupt, from the president. So they're going to be looking to cut and eliminate where they can for purposes of cost savings. We don't want to be cut or gutted in the process. Hence, what we have to do is to remain very pro-active.

We have to get our public to speak up for us, that's the key. The patients have to be mobilized. That's going to be critical on any vote that takes place. The legislators have to know that chiropractic is an essential service and that the public is demanding it. I think for the first time in our history, the profession is pulling together in one direction. I mean, you've got 40 groups. That's just never happened before. It's historic.

It was before my time, but I remember hearing from people who were there that in the battle for chiropractic inclusion in Medicare in 1973, a million letters arrived at the office of the chairman of the House Ways and Means Committee. The sheer size of that pro-chiropractic message apparently made a real difference. You are saying that in this era, with the stakes this high, we have to have even more.

Absolutely.

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And that chiropractors and others concerned for the profession need to know that their voice matters when added to all the other voices.

Undoubtedly.

What else would you like to tell our readers?

The profession is at a crossroads that it has never approached before. We can help determine our future. But unfortunately, our profession sometimes gets a little lazy. They don't do what's needed; they think the guy down the street is going to do it. *This effort is going to require every single solitary chiropractor to work with their patients, their families, their friends, and their relatives to get them into the database because we've been told that we are going to need millions of people this time.* A million isn't going to cut it; a million may sound like an impressive number, but when you're looking at a country with 300 million people, a million is not that impressive.

And in this case, unlike the chiropractic efforts on Medicare or the VA or the DOD, it's not just chiropractors that are seeking support from legislators. Every health-related group is making an effort on their members' behalf simultaneously.

Absolutely. We're all at the dance together. It's sort of like a contest. We're going to see who is going to sustain themselves and come out at the other side of this marathon. Whether or not chiropractic is going to be there in the same shape and form as it is now remains to be seen. I believe that it rests largely in the hands of the individual DC out there on the street. The major organizations can put together the plan and we can take it to the chiropractic profession. But if all chiropractors don't get activated, if they don't become pro-active in the process, it's not going to get done.

Daniel Redwood, DC, the interviewer, is an Associate Professor at Cleveland Chiropractic College – Kansas City and Editor-in-Chief of *Health Insights Today*.