

NETWORK NEWS

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CRG

CLINICAL RESOURCE GROUP, INC

In This Issue:

- ◆ Chiropractic Authorization Program
- ◆ New Radiology Guidelines in Effect Sept. 1st
- ◆ Treatment of Adolescents and Children
- ◆ Community Resource Mgmt. Teams
- ◆ Copayments
- ◆ Business Services Tips
- ◆ Provider Survey

Chiropractic Authorization Program

With nearly 5 months of chiropractic claims experience in our data base, CRG now has the foundation of clinical information it needs to identify ways to improve the management of the SCHA chiropractic network. Based on the data received to date, the CRG Quality Improvement Council approved a Chiropractic Authorization Program (CAP). The program is being used on a limited basis for the purpose of assisting participating CRG providers who have had difficulty working within the CRG Treatment Guidelines and have had health plan member services denied for coverage on a consistent basis.

CRG's network management objective is to streamline systems, minimizing administrative barriers for network providers allowing the chiropractor to focus on providing the care necessary for health plan members. Only when providers have problems working within the Treatment Guidelines on a regular basis will CAP participation be required.

The objectives of the Chiropractic Authorization Program are twofold:

- ◆ To avoid retroactive denials of service coverage for members and providers,
- ◆ To work with those providers that have difficulty incorporating the Treatment Guidelines into their course of patient care.

The program requires that services for SCHA members be authorized by CRG in advance of providing the service to a SCHA member. Depending on the situation, CRG may have the provider request authorization on a wide range of services including, but not limited to; all services, services to minors, radiographic services or services to patients beyond the initial 30 days of treatment.

An authorization process is costly to the provider and the administrator. Our goal is to graduate providers from the program as soon as possible and return them to the streamlined program that is the backbone of the CRG philosophy. With CRG staff working closely with the CAP clinics, the program is expected to remedy the situation within 3 to 6 months. During this time we will expect to measure marked improvement in the treatment patterns of the CAP provider.

Web Resources Reminder

www.clinicalgroup.net offers you:

- ◆ CRG Clinical Guidelines
- ◆ Provider Directory
- ◆ Current and Archived Newsletters
- ◆ Provider Administrative Manual
- ◆ CRG Participating Provider Application Form
- ◆ SCHA Member Eligibility Links

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New Radiology Guidelines Take Effect Sept. 1st

In our May issue of "Network News", Dr. Printon, CRG's Chiropractic Director, discussed how the Radiology Guidelines are to be applied. Since that time, we have worked with our Quality Improvement Council (QIC) to make revisions to the CRG Radiology Guidelines. These revisions have been completed and approved by the QIC. They will take effect September 1, 2003.

The revisions are focused on better defining the medical necessity for films prior to treatment of the patient. The guidelines explain that spinal pain alone does not necessitate radiographic imaging, unless the pain is the result of a current injury or trauma, or upon examination there is clinical reason to suspect the presence of other complicating pathology. Otherwise, a course of chiropractic treatment of the condition should proceed without the added cost and inconvenience of X-rays.

Your understanding and adherence to CRG's guidelines make it possible for this network to nearly eliminate the need to authorize patient services in advance. We urge you to download the updated CRG Treatment Guidelines and have them available for reference whenever you have a question regarding medical necessity.

Treatment of Children and Adolescents

By: Rick Printon, D.C. Clinical Director

There is considerable variation within the chiropractic profession regarding the treatment of children and adolescents (under age 18). The literature in this area is largely anecdotal or supported by case history presentations rather than scientifically based clinical studies.

It is widely acknowledged that chiropractic treatment can be effective in the treatment of such childhood conditions as colic and ear infections. In establishing treatment guidelines for pediatric care, CRG and SCHA will take a moderate approach that respects the results that chiropractic care can achieve while safeguarding patients from ongoing treatment that yields no conclusive positive results.

A reasonable clinical assumption, for example, is that a pediatric patient's cold or ear infection is a viral or bacteria infiltration.

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There is an argument that a subluxation may either directly or indirectly affect the patient's ability to fight off the infiltration. If the patient's condition is the result of a subluxation, their condition responds rapidly, within 4-6 visits over 30 days.

SCHA has asked CRG to coordinate care of pediatrics patients with its Community Resource Management Teams. Pediatrics cases whose condition has not resolved within the initial treatment phase should be referred to the member's SCHA case manager or primary care physician for further evaluation. Remember that chiropractic wellness care and maintenance care are not a covered services for SCHA members.

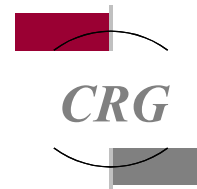
SCHA's Community Resource Mgmt. Teams

Fundamental to an integrated care management plan are South Country Health Alliance's Community Resource Management Team (CRMT). The Team is comprised of public health nurses and social workers. The CRMT coordinates the delivery of services that are provided and assures a system that effectively addresses the medical and social services that are necessary for SCHA members. Clinical Resource Group works with the CRMTs to provide early intervention for SCHA members.

SCHA CRMTs' essential responsibilities are:

- ◆ Advise and coordinate community care services according to established protocol
- ◆ Respond and maintain communication with members to address health concerns
- ◆ Review health assessments to determine the need for services and care coordination
- ◆ Review utilization patterns and make appropriate referrals.

The CRMT can be a valuable resource to you and your patient when a coordinated multidisciplinary approach to care is indicated. CRG will work directly with the chiropractor in arranging for CRMT referral.



Copayments Soon to Apply to MA and GAMC

We have been informed by SCHA that on or shortly after October 1, 2003, a \$3.00 per visit copay will apply to chiropractic care for most SCHA Members. The copayment will not apply to SCHA Members who are under the age of 21. Pregnant women whose condition may complicate a pregnancy are also exempt from the copay.

It is the responsibility of the provider to collect the copayments. The copay amount cannot be waived by the provider and the provider cannot withhold covered services to a Member because of their inability to pay. CRG payments will reflect the applicable copayment due from the Member. We will provide you with additional information on this new development as it becomes available.

Business Services Tips

Verification of Benefits

South Country Health Alliance members' benefits can be verified on line by accessing the State of Minnesota Electronic Verification System (EVS) at www.mnevs.state.mn.us. You can also call them at 800-657-3613 if you do not have the internet in your office. The May issue of CRG Network News includes detailed instructions for accessing information from this web site for persons with State of Minnesota health care benefits. You can access the May issue of CRG network news on our website, www.clinicalgroup.net. Click on provider services and then click on Network Archives to view the May issue.

Since we shared this information with the network in May it has become widely used by offices to quickly verify the coverage of their State of Minnesota patients. If you have not taken advantage of the service we encourage you to check it out. It's a great time saver. If you cannot access the internet from your office or need help with verification, call CRG provider services and we will be happy to assist you.

Patient Notes

CRG's guidelines provide for 6-8 visits within the first 30 days of care. This 30 day treatment period begins on the initial date of the initial patient visit. This is different from Medical Assistance which counts visits by the calendar month.

When the maximum treatment range of 6-8 visits has been reached within the first month of care, the Treatment Guidelines require evidence of progressive improvement over the initial 30 days of care and look to decreased frequency and intensity of treatment thereafter. If the treatment pattern is not decreasing in frequency and the adjustment code used is not decreasing in intensity, i.e. from a 98941 to a 98940, you may be asked to send "notes" to support continued care. When CRG requests "notes" we need the *patient's exam findings, x-ray findings if any, and daily notes*.

Continued coverage in a subsequent month is not automatic. The criteria for ongoing treatment as referred to above must be met. Members have a maximum benefit of 24 visits per calendar year. Therefore the use of these treatments must be prudent to allow for coverage over a twelve month period. An emphasis on patient education and self-management of their care is an important expectation of each patient's treatment program.

Management Notes: Provider Services Survey

CRG is well into its 5th month of managing the chiropractic program for South Country Health Alliance (SCHA). To date more than 325 members have received care from our network. We are very encouraged by the overwhelming positive response that the program has received from the participating chiropractors in South Country's nine county service area. We now have over 50 providers serving SCHA's 12,500 members.

Our objectives have been clear:

1. Open the network to quality SCHA county providers who want to participate
2. Minimize administrative processes and paper work for members and providers
3. Treat all our providers and office staff with our best personalized service
4. Pay member claims promptly and accurately
5. Provide an understandable Explanation of Payment

Attached to this issue of Network News is a brief questionnaire that we urge you to complete and return to CRG. This questionnaire lets you tell us how you feel we have done in fulfilling our stated objectives. We thank you for your support.

Gene M. Helle, *President*