

PCA DIRECT JULY 2020

PENNSYLVANIA CHIROPRACTIC ASSOCIATION

...Always Advancing Chiropractic

Servant Leadership - The Honor of Infinite Service to You

Dan Schatzberg, DC PCA President, 2020 - 2022

It is indeed an honor and a privilege to serve as PCA's President, again (I also served from 2012- 2014). Of course, such service also carries great responsibility. Why? Because PCA means so much to so many, in so many different ways.

PCA has a responsibility to serve its members...of course. PCA has a responsibility to serve its staff...obviously.

PCA most definitely has a responsibility to serve chiropractic patients, through doctors' offices, which provide critically important chiropractic care and related services.

Some may think that PCA is here only to serve the PCA members, which is understandable. But today, we understand that non-profit associations (PCA) and businesses (our practices) have many diverse stakeholders.

The better a business or association is able to serve ALL stakeholders, the more likely that business or association will have a positive impact and be successful. This concept certainly isn't new. It most certainly applies to your PCA. For example, if we help pass state and federal laws and regulations that are good for chiropractic patients, it will also benefit chiropractors and chiropractic offices.

At PCA, we find it very fulfilling when we pass meaningful legislation to help chiropractic patients and the chiropractors who serve them.

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NOTE: All links and email addresses are for your reference only

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2020 PCA Leadership

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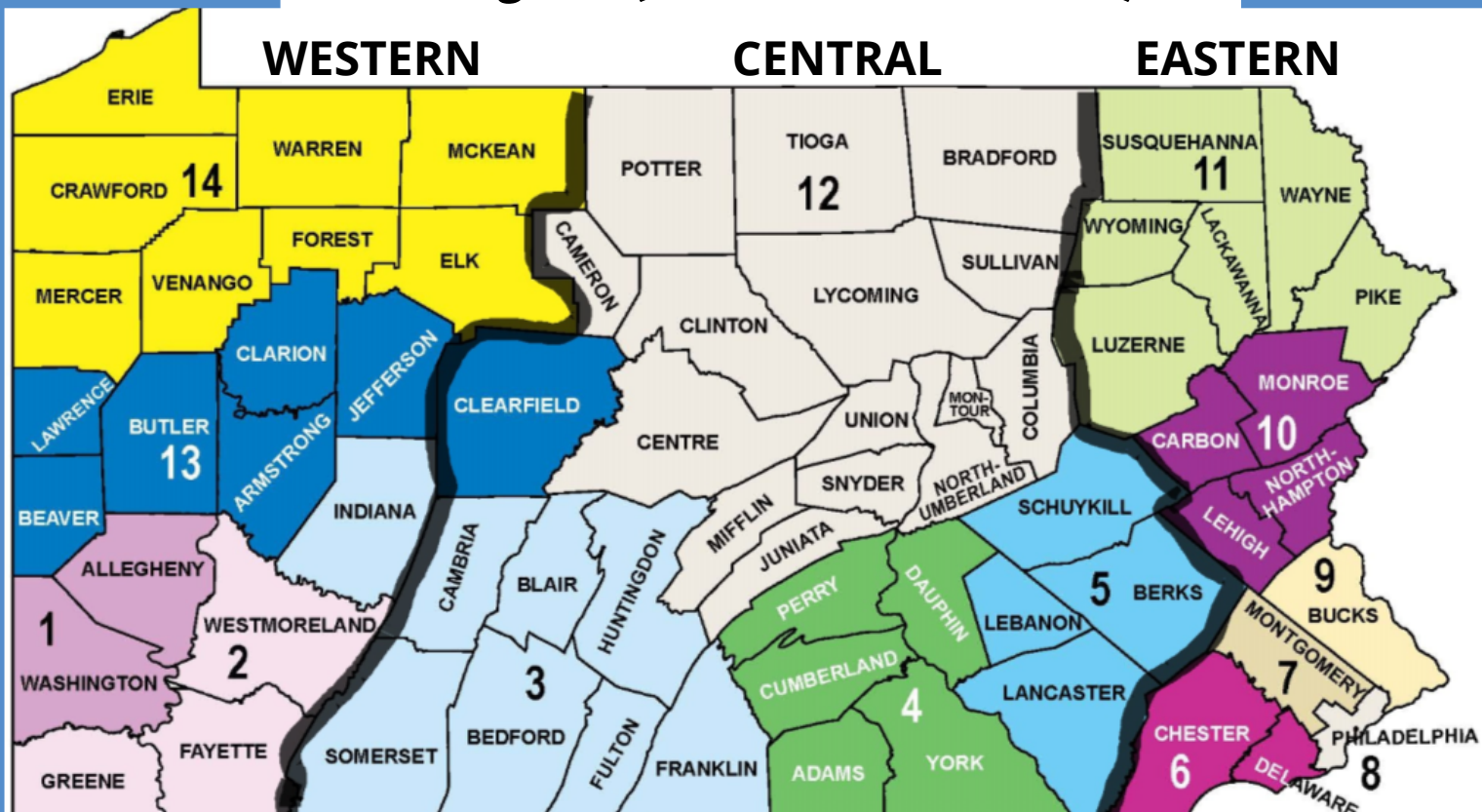
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Hours: Monday - Friday 9:00 AM - 5:00 PM

“Tip of the spear” for PA Chiropractors & Patients

Case S. Phillips, DC, Chair, PCA Legislative Committee

This month’s legislative update leads off with some good news from Harrisburg.

Chiropractic champion **Senator David Argall** (R- Schuylkill, Berks; Senate Majority Policy Chair) introduced Senate Bill 1215, “Parity in Payment.”

Some health plans in Pennsylvania deliberately reimburse chiropractors at a lesser rate, especially for evaluations and radiographic films. Senator Argall and PCA are leading the fight to end insurers’ discriminatory practices. We thank Senator Argall for defending and supporting our beloved profession. Dave Argall is a true warrior for chiropractic.

On the third Wednesday of each month, PCA’s Legislative Committee meets with our lobbying firm, **McNees-Winter Group**. On May 20, 2020, the Legislative Committee met with a light agenda, owing to the COVID-19 outbreak. As Legislative Committee Chair, I yielded the floor to PCA’s key lobbyist, former Lt. Governor **Mark Singel**, who discussed PCA’s legislative priority items.

House Bill 517, the “delegation” bill, remains in the House Professional Licensure Committee. We continue our work with Committee Chair Representative **David Hickernell** to push for consideration of HB 517 in the remaining days of this session (ends November 30). Since our last PCA DIRECT, the Legislative Committee organized a letter writing and telephone campaign requesting that Chairman Hickernell move the bill out of his committee and onto the House floor for a vote. When the PA House of Representatives returns to session, PCA will again call upon its members to make a second intensive outreach to Rep. Hickernell, as well as members of his committee. Pennsylvania DCs, PCA members included, MUST lead the charge in restoring our freedom to delegate exercise therapy to TRAINED personnel.

When the PA House of Representatives returns to session, PCA will again call upon its members to make a second intensive outreach to Rep. Hickernell, as well as members of his committee

PCA members are reminded that exercise therapy CANNOT be delegated to unlicensed personnel until a legislative solution is in place. That is PCA’s end goal- a legislative solution via HB 517 ([LINK HERE TO FIND MY PA STATE LEGISLATOR](#)). Will you do your part to see HB 517 become law this year?

Governor Wolf’s veto of a telemedicine bill was also discussed. Although the bill passed the House and Senate, it included restrictive language that would have limited telemedicine use for certain types of medications and treatments, including abortion, which led to Governor Wolf’s veto.

Additionally, SB 637 is headed to the Governor’s desk for his signature; this bill directs that a licensing board or commission go through a two-stage review when considering whether an individual applicant’s criminal conviction disqualifies her or him from state licensure.

One more important item- the issue of “surprise balance billing” may soon see action at the federal level- the US Congress. Stay in touch with PCA for updates on that important federal legislative initiative.

On a final note, members are reminded that your PCA team needs support from YOU. Please find the time to join our legislative calls and meet with your state representative and senator ([LINK TO PCA KEY CONTACT](#)). Like you would do for new patients, introduce your legislators to your practice, your patients and PCA’s legislative slate. You’ll be glad you took the time to do so and much like your relationships with your patients, you’ll likely develop a long-term rapport with your state senator and representative. ●

“LISTENING and COMMUNICATING”

Alison Benedetto, DC, Immediate Past President, 2018-2020

Greetings to my fellow DCs and PCA members. I bring this message to you from a different perspective-- that of the Immediate Past President of the PCA. Looking back over the last two years, I think I can summarize my experience serving you and the PCA in two words- “LISTENING and COMMUNICATING.”

When I first was elected by you to serve as PCA’s President, my goal was to lead the association in a manner in which all doctors felt welcomed, represented and had a voice about their profession and the PCA. I wanted to foster open lines of communication with the members, the PCA Board of Directors, PA’s state and federal legislators, as well as...yes, PA health insurance carriers.

From the start, my Executive Team, Board of Directors and PCA staff, with the help of our lobbyists at McNees-Winter Group, set forth lofty and aggressive legislative goals... updating regulations to address the importance of DCs delegating exercise therapy, creating parity in reimbursements for chiropractors, and reforming the excesses of health insurers’ third party administrators.

Also, having served as PCA’s Continuing Education Chair for several years, we ensured that continuing education courses were designed to bring top-notch speakers and topics most relevant to real world practice.

Keeping open lines of communication, especially engaging in dialogue, was vitally important to the success PCA achieved in garnering new and ongoing relationships with insurance carriers such as UPMC Health Plan and Highmark.

PCA’s Membership Committee dove head-first into coming up with member benefits and opportunities to provide the best PCA membership experience possible. Our PCA members only Facebook page has blossomed to be a place where docs can engage, debate, communicate professionally and receive often useful insights and information from their colleagues in real time.

Keeping open lines of communication, especially engaging in dialogue, was vitally important to the success PCA achieved in garnering new and ongoing relationships with insurance carriers such as UPMC Health Plan and Highmark. At the time when I wrote this, for example, PCA has now met with UPMC HP senior staff in person on three occasions and has had numerous follow up conversations regarding changes in treatment policy that will directly change the way you can practice...in a positive way!

We continue to reach out to other health insurance carriers in the hopes of building professional and constructive working relationships, - Continued on Page 13

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PENNSYLVANIA INSURER POLICIES ON MEDICAL NECESSITY

Jason Martin, PCA General Counsel

UPMC Health Plan and **Highmark BCBS** are continuing with their efforts to audit chiropractors. The post-payment audit is an effective method for UPMC and Highmark to ensure compliance with their medical and reimbursement policies. In the last couple of years, UPMC and Highmark have increased their attention on medical necessity documentation. If the medical records fail to conform to the applicable medical policy, UPMC and Highmark will most likely retroactively deny the claims, calculate an overpayment, and make a demand for payment for previously paid claims.

UPMC AND MEDICAL NECESSITY

The relevant portion of the UPMC Health Plan medical policy for chiropractic states:

Coverage is limited to medically necessary services provided by a licensed Doctor of Chiropractic, within the scope of their license. . . additional visits in the following circumstances are considered not medically necessary and not covered:

- When there is no meaningful improvement within 30 calendar days of treatment despite treatment modification,
- If therapeutic benefit has reached a plateau,
- If the patient's condition becomes worse or regresses,
- If the therapeutic goals have been reached,
- If the patient has become asymptomatic,
- If the patient or parent/caregiver can independently practice or self-administer the activities or services safely and effectively,
- If the services or activities are for the general good or welfare of the patient, such as exercise to promote overall fitness, flexibility, endurance, aerobic conditioning, maintenance of range of motion or strength, and weight reduction.

** UPMC Health Plan Policy Number MP.111 Chiropractic, 13 Years Old and Over (effective date February 2020).

HIGHMARK AND MEDICAL NECESSITY

The relevant portion of the Highmark BCBS medical policy for chiropractic states:

Manipulation, chiropractic manipulation, and physical medicine services may be considered medically necessary when ALL of the following are met:

- Therapy is provided for a neuromusculoskeletal condition; and
- Therapy is provided for the initial treatment of an acute condition, reinjury, or aggravation of a chronic condition; and
- Therapy is provided for the purpose of minimizing or eliminating impairments, functional limitations, or restrictions of the condition; and
- Therapy is provided in accordance with an ongoing, written treatment plan, appropriate for the reported condition, and is expected to result in restoration of the individual's level of function which has been lost or reduced by the condition:

Manipulation, chiropractic manipulation, and physical medicine services provided exclusively for the convenience of the individual or provider, for relaxation, or for personal lifestyle enhancement are considered not medically necessary.


** Highmark BCBS Medical Policy Y-9 (effective date January 1, 2020)

CONCLUSION

Unfortunately for many chiropractors, the documentation is insufficient and fails to satisfy these rather stringent requirements. To satisfy the UPMC and Highmark medical necessity documentation requirements, chiropractors should document a treatment plan (more than a schedule of care), the injury or need for care, the short/long term goals (improvement of loss of function, etc.), the patient's progression (ADLs, pain scales, ROM, etc.), and the patient's achievement of the goals. Remember, when UPMC or Highmark makes a medical necessity determination, the determination is based solely on the claim information and the medical record documentation. It is all about the documentation!

RECOMMENDATIONS

Chiropractors should perform a self-audit. This refers to a review of the medical record documentation with the medical policies in mind. If there are deficiencies, then those deficiencies should be addressed for future documentation. Chiropractors should consider implementing a good electronic health records system. And finally, chiropractors should consider hiring an outside consultant for assistance. Any investment of time or money you make now can pay serious dividends later.

Jason B. Martin, Esquire is the founder of **The Martin Law Firm, P.C.** Mr. Martin serves as outside general counsel for the PCA and he also represents chiropractors and other health care providers in the areas of compliance, insurance audits and recoupment, Act 6 peer reviews, Medicare audits and appeals, licensure and disciplinary matters, and other related areas. Mr. Martin can be reached at 215-646-3980 or jbmartin@jbmartinlaw.com. You can also visit his website at jbmartinlaw.com/healthcare-law/ 

PCA Treasurer's Update

The PCA is excited to announce that with the transition of Leadership comes a new Treasurer. **Jeff Snyder, DC** has agreed to take this position and his transition from PCA Secretary to PCA Treasurer has begun. Given that PCA has maintained strong fiduciary management of the budget this year and been most transparent with reporting, Dr. Snyder is sure to take on his new position with confidence.

Dr. Snyder's first big presentation will be in July. As has been the case for a decade, PCA will be completing a mid-year performance review. This review give leadership a chance to see how our revenues and expenses are tracking for the past six months. If changes must be made to re-align an expense line item or we have found a surplus in another and can fund a new project this review is the time to figure it out. The rest of the year we stick to any changes and consider our findings in November when we prepare the next year's budget.

You may recall that in January we shared with you that PCA had invested in a Webinar service. We were able to use that to offer **FREE** educational webinars for our members and staff. It has been a great success! ●

Continuing Education Update

Jeff Snyder, DC, Chair

Here we are in 2020 and who would have thought during a renewal year for Continuing Education (CE) that we would have been thrown into a crisis as we have over the past months. For those who started with CEs in 2019 you may have already taken courses the PCA offered such as *Spine Mobility Bootcamp*, *The Concussion-Subluxation Complex*, *Coding and Compliance (PCCI)*, or *ACRRT X-Ray Exam Prep* course, among other courses. However, if you waited for 2020 to start your CEs you may have been in a bit of panic when COVID-19 hit.

Lucky for you, PCA invested in an online webinar platform and with the help of our amazing staff, we were able to restructure programs set over the past few months and continuing through upcoming months to be offered online and from the comfort of your home or office. You were given the opportunity to get **all 24 CEs with our virtual convention** thanks to this innovation. But if you didn't complete all 24, no need to worry. CEs that are normally due on September 1st have been extended. Your PCA made sure to address this issue with the State Board of Chiropractic

which recently announced extending the deadline date for CEs to **November 30, 2020**.

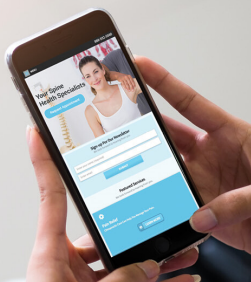
Living in this world as it is now may require more online programming should we get a second wave of CV19. We are preparing for this scenario, but also planning in-person programming for 2020-2022. Your opinion matters! What programming do you want to see? If you have an idea for a program or a presenter you would like to have for CE, let us know. Also, visit the PCA website for the upcoming programs already listed and keep an eye on your email and the PCA Member Only Facebook Page for CE Advertisements.

Did you know you can get some CEs paid for in your membership at no added cost? Wonder how? Call the PCA office to find out more. If you have ideas for CE programs, please share with us by emailing **pca@pennchiro.org**. If you are one to get involved, CE Committee could use your help for 1-2 hours per month. There are great rewards for participating with the CE Committee! ●

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July 7, 2020

J. Gerald Halloran, DC, Chair
State Board of Chiropractic
P.O. Box 2649
Harrisburg, PA 17105-2649

Dr. Halloran & Colleagues:

On behalf of the Pennsylvania Chiropractic Association, I hereby submit the following questions for the July 30, 2020 virtual meeting of the PA State Board of Chiropractic. These questions arise from numerous and consistent inquiries from the PCA's chiropractor members, chiropractic college students, and other chiropractors throughout the Commonwealth that have been received by the PCA over the past 4+ months. Without specific guidance from the PA State Board of Chiropractic, Pennsylvania chiropractors will be disadvantaged and unnecessarily at risk for potential liability and/or disciplinary action since these questions have very little, if any guidance associated with them:

1. How does the BPOA/ State Board of Chiropractic intend to enforce the Department of Health's mandatory masking and CV19-related orders, if a DC refuses to comply? How should a patient, a licensed DC or the public proceed in reporting a non-complying DC?
2. Can Pennsylvania chiropractors administer and perform COVID-19 antibody tests on patients in the office?
3. Can Pennsylvania chiropractors administer and perform instant COVID-19 tests on patients in the office?
4. Can Pennsylvania chiropractors provide/sell COVID-19 self-testing kits to patients?
5. Can Pennsylvania chiropractors prescribe or order COVID-19 tests?
6. What are the State Board of Chiropractic's interpretations of "acute care" and "care for life" if a mandated lock-down is ordered in the future?
7. Will the State Board of Chiropractic create specific guidelines for DCs' to follow if PA mandates going back to a lock-down (Red/ Yellow) in the future?
8. Will the State Board of Chiropractic promptly and directly advise DCs (and staffs, patients) about future mandatory (or recommended or optional) masking in the treatment of patients?
9. What is the State Board of Chiropractic's plan for 2020 chiropractic college graduates to take their Part IV examinations, as part of PA's licensure requirements? When will these chiropractic college graduates be advised about PA's plan for Part IV testing?
10. Will the State Board of Chiropractic affirm that if a PA DC submits her/ his CEs by the September 1 re-licensure deadline, that any additional CEs accrued between September 1 and the November 30 extension may be applied to her/ his 2022 re-licensure?
11. If a PA DC has a valid Pennsylvania medical marijuana prescription and takes such as prescribed, can he/ she practice without the risk of disciplinary measures being taken by the State Board of Chiropractic against her/ his license?
12. Will the State Board of Chiropractic "re-start" quarterly publication of a newsletter that addresses official actions, pressing issues and otherwise provides guidance to licensed DCs? If yes, when? If no, why?

On the behalf of the PCA Board of Directors, our members and Pennsylvania's 4,000+ licensed Doctors of Chiropractic, I appreciate what the State Board does for the profession and look forward to the Board's responses to our questions during the July 30 "virtual meeting."

Respectfully and most sincerely,

A handwritten signature in black ink, appearing to read 'Daniel Schatzberg'.

Daniel Schatzberg, DC
PCA President, 2020- 2022

PCA Insurance Committee Covers MANY Issues

Highmark, Telehealth, Discounted Services, and More

Mary Rutkowski, DC, DABCO, Insurance Committee Chair

The insurance committee is very appreciative of the members who take time out of their busy schedules each week to answer questions from the membership. If anyone is interested, we would appreciate an additional member or two. You can learn a lot on this committee as well as help your fellow Chiropractors.

We have been seeing quite a few cases lately complaining of denials from **Highmark**. Know that there are score sheets you can refer to, to be sure you have performed the proper amount of procedures and meet the complexity of the case to match the level you are billing. Appeal their decision if you can prove with the score sheets that you have billed properly.

The only discounts you can legally give are payment at time of service, which is across the board for any cash paying patient, and hardship cases, where there needs to be documentation to support why they are a hardship case to support the discount.

Question on billing insurance for treating family members-like your daughter or wife- DO NOT bill for immediate family members.

There are some insurances that are covering telehealth- but not across the board, so you will have to call each insurance company to find out if you can bill for tele-conference with a patient who is still not comfortable coming in but can use your advice in helping them manage their condition.

Doctors need to realize that there is a limit to how many procedures they can do in one visit, and that is why some docs are getting reviewed.

It is also imperative to know that if you are in-network and the insurance denies your re-exam or other procedures, you cannot bill the patient. You can submit an appeal to try and get them to approve what you billed, but you will have to write it off if the insurance denies your appeal. ●

Members: Please submit your questions by Friday afternoon so that the home office can notify the committee by Monday morning as to how many cases will need to be addressed on Tuesday.



POLITICAL ACTION COMMITTEE

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The Importance of Aged Claims Management: How Involved Should YOU, the DC, Be?

Karin Toner, ChiroAbility, LLC

As a volunteer member of the PCA Insurance Committee and the owner of an outsourced billing company, I'm frequently reminded of the lack of management by owner DCs regarding practice profit.

Some of the questions submitted by PCA members show the committee a lack of staff/doctor training as regards knowledge of the often confusing world of health insurance billing/collections. When beginning a new outsourced billing client, we here at **ChiroAbility, LLC**, are often amazed at the size of the unpaid insurance claims over 45 days. Recently a new client told us he was under the impression that his AR report comprised only 4 pages; when we ran the report it turned out to be **200+ pages!** How can that be?



When you make it a priority to sit down with your insurance CA every month, you'll see that the insurance accounts receivable report is telling you a story.

What frequently causes this type of misunderstanding of this practice parameter is trusting, but not verifying, that staff are doing their job. I'm not attempting to put the blame where blame doesn't belong; however, even the best insurance CAs miss receivable availability from time to time. Through my consulting efforts, I often see CAs wearing too many hats within the practice, making it easy to sweep long unpaid insurance claims under the carpet or adding them to a pile with the intent to "get to it soon."

When you make it a priority to sit down with your insurance CA every month, you'll see that the insurance accounts receivable report is telling you a story. Patterns will emerge. Timely filing issues will be revealed as well as long overdue claims still unpaid due to lack of staff training in coding, carrier nuances, software errors, etc. At times you might see that claims are listed as being due from an auto carrier when in fact the med pay limit for that case has been exhausted for some time thereby possibly losing reimbursement due to timely filing issues with the health care carrier. If you are outsourcing your insurance billing, make sure the company provides you with access to or a written aging report monthly and set aside time to go over it with them in person or on the phone.

Track those potential losses of practice profit by making a plan today to sit with your insurance CA at least every 30 days going over the report in detail for all claims that are over 45 days past due from the date billed. Discover what could have been done differently and assure the CA takes action immediately. Taking my suggested proactive steps can have a significant result in increasing your profit for the very valuable services you provide patients daily. •

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Membership Committee Update

Ray Benedetto, DC, Chair

The Membership Committee started the year with a few initiatives. These have obviously been altered due to the current events of the last few months. While we're always looking to grow our membership, the committee decided in these trying times to focus the majority of our efforts towards better serving our current members and helping them to navigate these troubled waters. The committee decided to revamp its standard operating procedures (SOP) as it pertains to new member on-boarding, retention and servicing. A 12-month plan was implemented to better serve our new members with multiple points of contact by staff, committee members and myself in support of a new member in their first year with PCA and beyond. The goal is to always continue to show value in your membership dollars and to improve retention.

You will see from the chart on this page that there are a few less members this summer than last. Generally, a renewal year brings on new members looking for continuing education credits at member prices. At this mid-point of the year, PCA has had **50 new members**. Your continued support even in the face of unprecedented world events is much appreciated and continues to give us the ability to fight for YOU in the commonwealth.

As always, there will be a Board approved drop list of DCs that have not paid their 2020 dues. The good news that while many of our members suffered financial losses due to business shutdowns and patients being asked to stay home, we have not lost membership due to hardship. PCA has been working with members on payment plans, when needed, to keep members active and in the know.

Our first new member of the year, **Dr. Roger Saias** not only joined the Membership Committee but also the Legislative Committee. We applaud his engagement. Thank you, Dr Saias.

We've had a number of new members join the PCA Facebook page. **If you are not part of PCA's Facebook community, please request to be added to the members-only page.**

Only the DC can join this page, while their staff may join of the PCA public page. This page posts all the same news and information without the communications between the DCs.

Year after year, PCA reminds members of the referral incentive for members that get a peer to become a member at the full dues rate. A \$150 (or 3 months of dues) is a 25% discount off next year's dues. Why is it that no members take advantage of this offer? If your peers are not members, they should know that PCA fully supports them and the profession. \$600 a year to know that PCA is going to advocate for them, that PCA is going to be there to answer questions when their staff calls, that **PCA will get them the most relevant Chiropractic news of the day** and that "PCA has their back".

The **Membership Committee meets every month on the 3rd Tuesday at 1pm via conference call.** If you have ideas on recruiting new members and how to better serve our members, I encourage you to join our committee and make a difference for the better!

Help YOUR PCA by having your associates, partners and peers become members! Go to pennchiro.org and JOIN TODAY!

Feel free to always reach out to the home office or myself for any of your membership needs or concerns. We are here to serve you, our members! ●

Detail of Memberships by Type			
	Rate	6/24/2020	6/17/2019
1st year license:	72	8	8
2nd year license:	150	12	6
3rd year license:	300	1	0
Group Associates:	200	92	81
Group Primary:	600	40	46
Hardship:			0
Life:		3	3
Non-resident:	60 >100	16	14
Premier Member	1200	4	2
Regular:	600	594	620
Retired:	30	57	50
Semi-retired/part time:	300	60	56
Student:	0	50	62
Strategic Business Ptnr:	1300	12	12
Business Membership:	500	8	6
		957	966

Since ENGAGE2020... Update on ACA actions & initiatives

Christopher G. Cianci, DC, CCSP

PCA Delegate to ACA House of Delegates



The ACA has continued its high level of activity on behalf of DCs nationwide, as follows:

- Chiropractic Medicare Modernization Act of 2019; 77 cosponsors
- ACA was instrumental in having the US Department of Homeland Security (DHS) state DCs were essential workers during the COVID-19 response
- Statements from the ACA Board of Governors;
 - Call for expanded access to remote learning (and CEs) for chiropractors
 - Let's Work Together to Protect and Serve Our Patients, Staff, Families and Communities
 - ACA is committed to addressing misinformation that may cause confusion. For example, some claims are being made that spinal adjustments can boost immunity and decrease the risk of contracting COVID-19. While spinal adjustments are effective for a number of conditions, there is no quality evidence to support that they can improve immunity to COVID-19.
 - Safe, Responsible Response to COVID-19
- ACA to CMS: Allow Chiropractors to Furnish Telehealth Services in Medicare
- ACA Contacted the Centers for Medicare & Medicaid Services reiterating the need for chiropractors to furnish telehealth services in medicare. (PDF)
- ACA to Administration: Chiropractors Provide Essential Care to Combat COVID-19
- ACA contacted the Department of Health and Human Services (HHS) and Vice President Michael Pence to assert that doctors of chiropractic provide essential care necessary to support healthcare and the nation's infrastructure.
- ACA to Department of Health and Human Services: Allow Chiropractors to Practice to the Full Extent of their Licensure for Telemed Services
- ACA contacted the Department of Health and Human Services (HHS) to request that doctors of chiropractic be authorized to practice to the full scope of their state license via Telemedicine in Medicare in support of efforts to combat the COVID-19 pandemic.
- ACA to Cybersecurity and Infrastructure Security Agency (CISA): List Chiropractors as Essential Healthcare Providers
- ACA contacted the Cybersecurity Infrastructure Security Agency (CISA) (Department of Homeland Security) to request the addition of chiropractors to the federal list of essential healthcare providers (PDF)
- Statements from ACA and Patient Access to Responsible Care Alliance (PARCA) Call for Protecting the Families of Essential Healthcare Providers (PDF)
- Call for Hazard Pay for Healthcare Providers, Aid for Unemployed and Underemployed Healthcare Providers, and Increased Access to Telehealth Services (PDF)
- Call for Access to Personal Protection Equipment (PDF)
- Call for five-year waiver on budget neutrality for CMS Evaluation and Management (E/M) code proposal (PDF)
- Guidance from the CDC ACA suggests doctors of chiropractic (DC) remain up to date with public health guidance issued by the Centers for Disease Control and Prevention (CDC) with regard to the outbreak of the coronavirus (COVID-19). ●



Initiating and passing great chiropractic legislation and serving as a watchdog against harmful legislation are a few of the highest services we can perform ... a never-ending challenge.

PCA is responsible for providing quality continuing education programs. Your PCA Continuing Education Committee and PCA staff provide quality programs with very attractive and competitive discounted pricing. Surprisingly and frequently non-members complain about not getting the discounted pricing. Maintaining your skill set as a PA-licensed Doctor of Chiropractic, both in theory and practice, is vitally important to both members, their staff and patients. PCA understands how important it is to members that the CE is relevant.

PCA is a community of chiropractic sisters and brothers from all walks of life, who serve in our profession together. We share many common values regarding health and health through chiropractic, even though we may have different practice philosophies and practice styles.

PCA's Annual Convention Committee and PCA staff are responsible for developing and delivering our convention, including transforming an in-person 2020 convention at Kalahari Resort to a virtual convention this past May in response to the CV-19 pandemic. PCA's highly rated conventions are a great way to receive quality continuing education, see innovative and useful chiropractic products being displayed, demonstrated and sold by exhibitors, and as importantly, to connect with your chiropractic community. Of course, 2020 was profoundly different because the committee had to address the pandemic and go virtual in literally a matter of days, for which they deserve special credit. Talk about service above and beyond the call...

PCA also exists to help field your insurance questions and legal questions. For this exceptionally important (and free to members) service, we have a dedicated Insurance Committee and General Counsel. By the way, I'd be remiss if I also didn't put in a plug for PCA's members-only health insurance, which in itself is a great service to members.

But to me, what is most important... PCA is a community of chiropractic sisters and brothers from all walks of life, who serve in our profession together. We share many common values regarding health and health through chiropractic, even though we may have different practice philosophies and practice styles. We are a chiropractic community with a common cause through our shared profession and our commitments to serving our patients.

Being involved in the legislative process, attending PCA continuing education programs, going to PCA conventions, serving as a PCA community advocate and leader are all guaranteed to add to your success and fulfillment as a Doctor of Chiropractic.

A dear chiropractic friend has reminded me- by giving me the book, The Infinite Game... that chiropractic is not playing a game that is finite, that ends after time expires or the final out is made. Instead, at PCA we are performing in an infinite game. Our goal is to help make your choice to serve your patients through the profession of chiropractic more fulfilling for you every day of every year. It's not easy playing the infinite game. It's a great responsibility and PCA is likewise perpetually dedicated to service to you, your staff, your patients and your communities.

Through thick and thin, the PCA is here to support the PCA family and chiropractic community. Proudly wear your PCA pins and other PCA apparel. We are **#PCAStrong**. ●

PCA 2020 VIRTUAL CONVENTION

- 24 CEUs Available
- Same Speakers/Seminars as previously scheduled
- One base price for all speakers/seminars
- Live Webinars & Recordings of seminars
- CA/Staff Virtual Program



Member Spotlight - Jenifer Epstein, DC - Hershey, PA



Hershey, PA - the Sweetest Place on Earth, but also home to **Jenifer Epstein, DC, and Hershey Family Chiropractic** (hersheyfamilychiropractic.com/).

Since joining the PCA, Epstein is a name that keeps coming up, and not just for her chiropractic work, but also her creative community involvement. No, I'm not talking about her 285.8K likes on **TikTok**, but @drjeniferepstein has graced the *For You Page* with some great tips (and dancing), as well.

As a means of giving back to her community for the remainder of 2020, Hershey Family Chiropractic is **donating 100% of new patient fees to a small business in the community**. Each month patients and community members can nominate a small business in the area who may need a little extra support to be entered into the drawing.

Even a small gesture can have a large impact, and through the continued outreach to their community the group at Hershey Family Chiropractic has been a shining light to many and truly is **#PCAStrong**. ♦

“LISTENING and COMMUNICATING” - continued from page 4

Growing the PCA will require not only communicating but also skillfully listening and truly hearing the needs of our members and the direction they would like to see the association move or the issues they would like to see tackled

...so that we can communicate to them what it's truly like practicing and treating patients within their health care models. Certainly, things may look fine on paper, but the actual practicality of things is almost always very different. Communicating has remained key throughout our COVID19 pandemic. No one could have anticipated this to happen and things changed very quickly, leaving doctors with so many questions surrounding the ability to practice and under incredibly challenging circumstances. While the PCA does not have the authority to make any legal, legislative or regulatory determinations regarding the pandemic, we very carefully listened to your concerns and I felt it was our responsibility to communicate with as much clear information as possible and in as timely a manner as possible. Our efforts, which so many of you have complimented us for, was much more difficult than it might have looked like from the outside.

While some authoritative bodies remained confoundingly silent, I wanted to be sure our members and the profession in Pennsylvania were informed to the best of our limited capacity and abilities. At times, that information was not necessarily what we wanted to hear, but I know that I did my best, along with my Executive Team, Board of Directors, PCA committees and PCA staff. To a person, everyone was united by a common and compelling mission- listening to and serving you, your patients and your communities.



Moving forward, listening and communicating remain of utmost importance in advancing the mission of our association. Growing the PCA will require not only communicating but also skillfully listening and truly hearing the needs of our members and the direction they would like to see the association move or the issues they would like to see tackled. Listening to the recommendations of others and putting that information to use, will help foster the engagement and involvement of others.

I am happy to continue to serving the PCA in my new role and I'm confident that our new president, Dan Schatzberg, will foster positive, constructive, healthy and open lines of communication as well as listening with an open ear and mind, in an effort to improve the profession, especially the practice landscape, as well as patient care in the Commonwealth.

With that, I leave you with a quote from Tony Robbins: “To effectively communicate, we must realize that we are all different in the way we perceive the world and use this understanding as a guide to our communication with others.” ♦

Mid-Year Budget Review

Every July PCA leadership takes a hard look at the actual to-date revenue and expenses and compares that information to the approved operating budget. This review gives the Board of Directors a chance to see where changes to the budget may be needed to ensure PCA meets or exceeds projections.

Due to the unforeseen impacts of the Covid-19 pandemic, PCA cannot predict the outcome of this year's budget. We are so used to knowing what is likely to happen in the fall & winter based on the number of members we have or how many seminars are scheduled that we can predict approximate revenue and expenses. Leadership will be hard pressed this summer to know what to expect in CE revenue or office expenses for the rest of 2020.

What we do know is what has happened to-date. June's month-end numbers are showing a trend of positivity that is welcoming given all the changes that our members, their patients and staff have had endure.

Since PCA was unable to hold the in-person event, the Annual Meeting of Members has been postponed. New leadership would have turned over and PCA's new Treasurer, **Dr. Jeffrey Snyder**, would have been introduced. Dr. Snyder has been a very active member of the PCA and has been on numerous committees. Dr. Snyder is the current Continuing Education, Chair and was the Secretary since May of 2018. The diverse PCA engagement made him a great candidate for PCA's Treasurer. Since the transition, he has had just a few weeks to get trained and prepare for his first mid-year budget review.

The Numbers at the halfway point:

Membership Annual Budget:	\$433,812	
Membership Actual Jan-June:	\$294,847	68%
CE/Convention Annual Budget:	\$129,575	
CE/Convention Actual Jan-June:	\$ 57,594	48%

PCA ended a long time copier lease; savings of \$2,640 for 2020.

Leadership Travel budget will not be used; savings of \$4,000 for 2020.

Convention expenses limited since going Virtual, savings of \$35,000 for 2020. ●

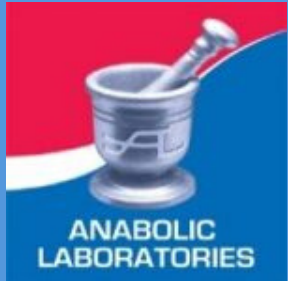


JOIN THE PCA FACEBOOK MEMBERS ONLY GROUP!

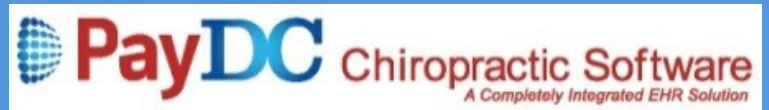
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MEMBERSHIP APPLICATION

Please Circle One: Dr. Mr. Ms. Full Name: _____

Practice Name: _____

(If registering as a Group Member, the GROUP practice name is required)

Primary Practice Address: _____

City: _____ State: _____ Zip: _____ County: _____

Phone: (____) _____ Fax: (____) _____ Email: _____

For **GROUP Member**, indicate the primary member's full name: _____

Were you a previous PCA Member? ☐ NO ☐ Yes Referred By: _____

(Must be completed at the time of submission. NO EXCEPTIONS!)

Chiropractic College: _____ Graduation Date: _____

PA License #: _____ Date PA License issued: _____

*By signing, I agree to abide by charter provisions and bylaws of the Pennsylvania Chiropractic Association during my membership. *Signature _____

MEMBERSHIP TYPE Please check the box that applies:

TYPE	PAYMENT	TYPE	PAYMENT
<input type="checkbox"/> Student	FREE	<input type="checkbox"/> Group Associate Member (Annual)	\$200
<input type="checkbox"/> Retired (Annual)	\$30	<input type="checkbox"/> Semi-Retired (Annual)	\$300
<input type="checkbox"/> Regular Monthly Member (recurring charge)	\$50	(Semi-retired works less than 15 hrs./wk.)	
<input type="checkbox"/> Regular Member (Annual)	\$600	<input type="checkbox"/> Premier Member (Annual)	\$1200
<input type="checkbox"/> 1st Year License Member (Annual)	\$72	New in 2018! This membership includes Convention registration, Annual dues, up to 12 CEs, Act31, access to the State of the Profession phone call with the Executive Committee plus all the benefits of Regular membership!	
<input type="checkbox"/> Non-Resident Member (Annual)	\$100		
<input type="checkbox"/> 2nd Year License Member (Annual)	\$150		

†Dues are prorated after February 1st. Call for exact rates.

☐ **Yes, Send me the link for FREE REGISTRATION with ECAIPN/SecureCare**

PAYMENT INFORMATION

☐ My check is enclosed in the amount of \$_____ Check #_____

☐ Please bill my credit card: ☐ Visa ☐ MasterCard ☐ Discover

☐ Credit Card# _____ Exp. _____

Date ____/____/____ Validation Code: _____

Name on Card: _____ Card Zip Code, if different from above: _____

Signature: _____

If paying by credit card, you may fax application to: **717-232-8368**.

*If faxing application, please call 717-232-5762 or email pca@pennchiro.org to confirm receipt.

Make check payable and mail to:
Pennsylvania Chiropractic Association
1335 North Front Street
Harrisburg, PA 17102

How Do You Spell

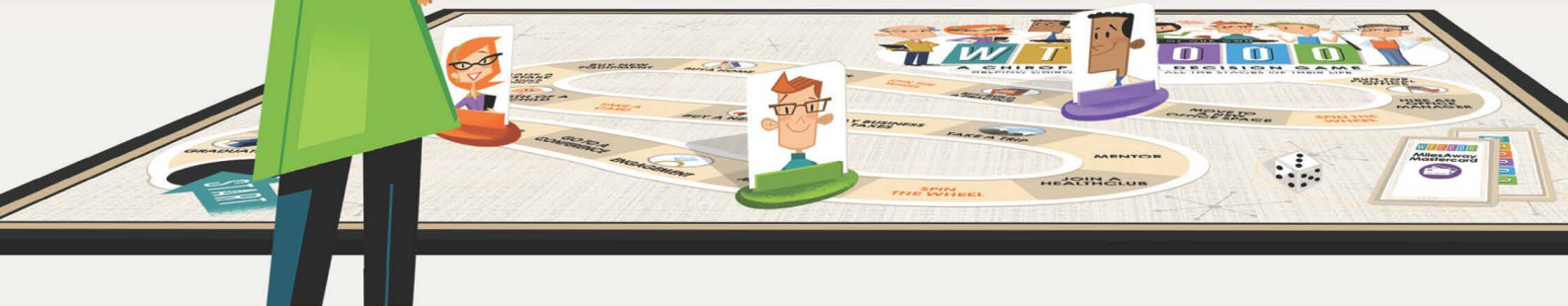
RISK MANAGEMENT?



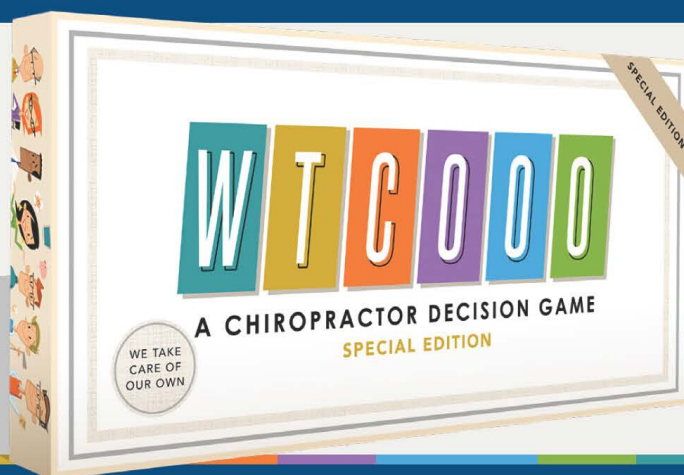
This is Nina.

She first discovered NCMIC 14 years ago when she purchased **malpractice insurance**. From starting her practice, to receiving guidance from the claims advice hotline, to benefiting from NCMIC's financial products and business insurance, Nina appreciates the support NCMIC has provided through all the stages of her career.

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