

2018 Talking Points for Chiropractic Inclusion in Okla. Work Compensation:

Number one Legislative Agenda:

A. Work Comp. Inclusion: The legislators must be informed that the Chiropractic Community is very much interested in the “injured worker’s” ability to select the doctor of their own choosing for treatment of their “on the job” injuries.

(1) **Most Injured Workers**, are employed in “blue collar” positions where they do manual labor while standing or sitting for long periods of time. Others in clerical jobs or production lines, performing repetitive movements and develop symptoms insidiously. Most of these injured workers have had physical problems in the past and were expediently and successfully treated by a Chiropractic physician.

(2) **MGT America**, same research Corporation that did study on how to improve cost efficiency in Oklahoma Dept. of Corrections, was hired by the UCA to perform a cost analysis on the Oklahoma Worker’s Compensation System. No enforced categorical statistical outcome studies recorded in Oklahoma. Therefore, results were extrapolated from MGT’s research studies in Ohio, Florida, Texas, Colorado and Indiana, finding savings of (+) to (-) 5% of 62% - 83% in each category of statistical outcomes. ie. time off work, pharmaceuticals, hospital stays, re-injury, surgeries, disability settlements, etc. Average cost of five (5) to a capped 18 Chiropractic treatment visits (adhering to guides) \$920 - \$2,700

(3) **W.C. Medical protocol** is such that the system gives the employer the authority to make the call as to which doctor the “injured worker” will see first. From that point forward, it will take a session in court to get an order from the judge to allow the injured worker to seek care elsewhere. Now, let’s examine the recommendations, timeline and cost of care from this point forward:

PCP Examination - \$85.00 - \$110.00

- Prescription medications – anti-inflam. - \$ 90.00/month, muscle relax. - \$150.00/month; pain - \$60.00
- Possible x-ray series - \$ 150.00 - \$300.00,
- Radiology report - \$104.00 - \$250.00
- Return visit in ten (10) days for evaluation - \$65.00, Recommend Specialist Evaluation

Orthopedic, Neuro Examination - \$350.00

- Recommends one or two MRI’s - \$1,900 or \$3,000,
- Specialist follow up visit for Radiology report- \$200.00, recommendation for Phys. Therapy Rehab.

Physical Therapy Evaluation - \$ 150.00,

- resistance range of motion testing - \$350.00

Total Evaluation Costs thru first 30 days before any treatment beyond prescriptive drugs ...

- \$ 3,654 - \$4,975

Lost wages compensation (30 days)

- \$ 2,100 for time off work

Total Costs to the W.C. System before Treatment (first 30 days after injury)

- **\$ 5,694 - \$ 7,015**

Physical Therapy Rehab regimen (three months) – P.T. modalities and exercise

- \$5,350.00 - \$6,560.00
- Prescription medications – anti-inflam.- \$90.00 - \$270; muscle relax...\$150.00 - \$ 300); pain meds...\$60.00

Cont’d minimum lost wages compensation (1–3 months) - \$ 2,100 - \$ 6,300

Total Cost for P.T. Rehab Treatment & lost wages - **\$ 7,750** (min) - **\$ 13,490** (3 months off work)

Total Cost (pre-treatment plus Rehab period) **\$13,444** (min.) - **\$ 20,525** (3 months off work)

If Rehab falls short:

Surgery cost (eliminate slightest of justification on MRI(s)) \$ 25,000 - \$ 115,000

Physical Therapy rehab to recondition after surgery \$ 5,000 - \$ 6,500

Lost work wages (2 months) \$ 2,100 - \$ 4,200

Total cost from injury to post surgery **\$ 52,625 – \$146,225**

Chiropractic Care Cost \$ 920.00 - \$2,700.00 (18 visit cap)

(following W.C. System Guidelines)

On another Point:

B. Equal Co-Pay Bill

(1). Chiropractic Physician are considered a Specialist, same as a Surgeon

Therefore, patient is charged same co-pay, usually \$50.00, instead of a \$20.00 like they pay their PCP

However, since DC's cannot bill same amount as a surgeon for exam (\$275 - \$350), despite our exam being five times more extensive, many times the insurance reimbursement is less than the co-pay or \$5.00 at most, while the extra financial burden of \$50 rather than \$20.00 at a PCP, is placed on the patient.

Therefore, there becomes no incentive for the patient to visit the DC's office to treat the cause of a musculoskeletal condition, which consequently becomes chronic and eventually ends up going through all the protocols the Work Comp. patient experiences and the costs that accompany it.

C. Same Fee for Same Service Bill

(1). All Physicians should be reimbursed same amount for same coded service with no discrimination against any healthcare discipline and allowed by that discipline's Practice Act.