

AMERICAN CHIROPRACTIC ASSOCIATION MANAGED CARE DATA COLLECTION

Part 1: Resolution

The ACA House of Delegates recently passed an important resolution you should know about. It states in part:

The American Chiropractic Association (ACA) has long been concerned over the harmful and discriminatory practices of managed care organizations, particularly chiropractic networks and third-party administrators affecting proper patient care and the practice of chiropractic. We vehemently oppose these harmful and discriminatory practices, including but not limited to: limiting full scope of practice, inappropriate CPT applications and reimbursement policies, use of discount/affinity programs, restrictive limits of care, and improper utilization review

To determine the scope and impacts of managed care on the chiropractic profession, ACA staff is collecting data to identify abuses and develop an implementation plan to halt these unfair practices.

While we have developed excellent working relationships with certain managed care networks, others will be compelled to respond given factual information on their practices that you provide.

Part 2: Data Collection

You can be an important part of creating change in the managed care industry by providing data on your managed care experiences. **Be assured we will not release your name to any managed care network.** Please complete the following:

Network / MCO: _____ Location/State: _____

Primary Issue (network participation, UR denials, bundling, preauthorizations etc.): _____

Other Comments: _____

Part 3: Documentation

Are you able to provide documentation on the above complaint if asked? Yes _____ No _____

If patient information is provided, please remove or otherwise expunge any patient identification information and/or confidential patient information from the documentation provided to us.

If ACA needs to contact you, please provide the following:

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Email Address: _____

Thank you for your cooperation so managed care improvements can be made for the chiropractic profession.

Please fax the completed form to: **703/243-2593 - Attention: Department of PDR**

