

National Insurance Fraud Seminar Focuses on Chiropractic

By Daniel J. Osborne, M.S.

In mid-September 2003, I attended the *International Association of Special Investigative Units* (IASIU) 18th Annual Seminar on Insurance Fraud in Orlando, Florida, purportedly planned to provide the best education available on insurance fraud, where more than 30 topics are being offered, taught by professionals from public and private sectors. The seminar opened with an announcement by the IASIU president that the seminars focus would not be on property related claims issues, as was the case in the proceeding seventeen gatherings, but would be on health care fraud. This re-focus was brought on by a paradigm shift within the insurance industry that the biggest loss as the result of fraud is not from property (arson, theft, etc.) claims but is from fraudulent health care claims. *Complete information on IASIU and their 2003 seminar can be found on its web-site at www.iasiu.com.*

In actuality, the seminar focused little on the overall problem of health care fraud in liability claims but was clearly focused on the activities of chiropractors, with a primary emphasis on multidisciplinary practices and mobile electro-diagnostic testing labs. After the seminar, one could have left with the belief that health care fraud and chiropractic were synonymous, as the speakers continually attacked chiropractors with no care taken to inform their audience that not all chiropractors engage in fraudulent activity. It was quite apparent that the speakers were in an **US** (insurers) against **THEM** (chiropractors) attitude! Clearly, the chiropractic profession was not presented as a viable part of the solution in combating fraud and a member of the health care fraud fighting team – but appeared to be the target of it!

In one presentation, after the speaker failed to mention the chiropractic examining boards role as a source for investigators to report suspected chiropractic fraud, I informed him of this oversight and requested he inform his audience of the chiropractic boards' involvement in combating fraud. My request went unanswered.

In another presentation, a speaker from Washington State did mention the chiropractic board as a potential source for reporting suspected fraud involving chiropractors, but added that it did not do any good until now – “because we have beat them up.” It was ironic to listen to the silence and comments of these speakers from the hotel located just across the street from the one the *Federation of Chiropractic Licensing Boards* (FCLB) had held their annual conference just months earlier which included discussions on health care fraud/abuse trends and efforts to combat the fraud!

The truly amazing aspect of the entire seminar was the unqualified and inaccurate information presented by the speakers:

- *An attorney defining what is a “worthless” diagnostic test.*
- *No billing code available for Current Perception Threshold test.*
- *CPT defines proper billing for technical components of services/procedures rendered.*
- *HCPCS codes are for hospitals and that chiropractors can't use them.*
- *Chiropractors can't perform 99205 level exams under any circumstance.*
- *All mobile diagnostic tests performed do not give good raw data.*
- *Improper coding to report a CPT code and indicate service provided for all diagnoses reported*
- *Consultation codes can only be used if referral from other discipline.*
- *ACA rules preclude a chiropractor from doing a CMT and E&M service on the same day.*
- *Identifying as a red flag for fraud the use of any CPT code ending in 99.*
- *If a chiropractor uses a CPT code ending in 99 he/she must send a letter to the insurance company to explain why out of all the codes available they used a code ending in 99, as well as a letter to the AMA telling them that they used the code.*

My purpose in attending this seminar, which was well attended by over 1000 SIU representatives of insurance companies throughout the United States, was to learn of new fraud trends in health care, methods to identify the fraudulent activity, and

current efforts to combat the fraud to educate myself so that I could better consult current and future clients. However, after attending the seminar I found no substantive information to meet my goals, and left with surprise that the property & casualty insurance industry did not appear, based on the presentations, any more sophisticated on investigating health care fraud than they were some seven years ago when I left their investigative ranks.

The attitude of the presenters at this conference, and the vast majority of the attendees, clearly demonstrates the insurance bias toward chiropractic. How should the profession deal with these misperceptions? I would urge chiropractic leaders to attend these programs and build relationships with association officers and presenters. When your presence and active participation in an organization is known, attitudes change. This battle is winnable only if we are actively involved on the battlefield!

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