



NYSCA SUFFOLK COUNTY

District 7

JANUARY 2022 NEWSLETTER

PRESIDENT'S MESSAGE



Dear Colleagues and NYSCA District 7 Members:

First off. A very Happy New Year to all of you!

So, why does 2022 matter? Well, this just may be the year that will change you, your practice, your profitability and very likely, regenerate your interest in treating Medicare patients. I am talking about the Medicare Modernization Act. If this passes in the US Congress, it will transform your practice's relationship with Medicare patients. Imagine being the first generation of DC's that would actually be reimbursed by CMS for more than the adjustment of a spinal subluxation? We would potentially be reimbursed for all of the treatment modalities we use to best serve our patients, as well as reimbursed for the initial consultation and examination. This change would be historical and we ask you to reach out to Congressman Lee Zeldin and ask him to support and be a co-sponsor of this important bill. As of January 6, 2022, he has yet to sign on and endorse this bipartisan bill that already has over 100 cosponsors. Please see the link inside for easy access to Congressman Zeldin's email.

Another milestone that has potential to be reached this year is the unity of NYSCA and the Council. Imagine how much more progress there could be in NY with two smaller organizations joining to become one larger and more powerful organization. It is apparent to me, that most chiropractors, in either organization and despite overarching philosophies, are focused on doing what is best for their patients and for the future of chiropractic in New York state. Let's hope that 2022 is the year for unity.

2022 will also bring the evolution of workers compensation with the new Onboard system. Changes will streamline workers compensation billing procedures, and your ability to request authorizations using variances and more, all online. This is a system that your Vice President, Dr. Robin Stein, has so graciously educated all of us on over the last 12 months at our monthly general meetings. If you are reading this and have no idea what Onboard is, I recommend you attend our next general meeting.

Our next general meeting is scheduled for January 19th when Dr. Neil Levin will present information on the Anti-Inflammatory Diet and how this can transform the well-being of our patients. Dr. Levin is a NYSCA District 7 member and is a licensed chiropractor and certified nutritionist who practices in East Northport. This presentation will offer 1 CE

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IN PERSON MEETINGS - Radisson Hotel Hauppauge - 8 PM

January 19th

Dr. Levin - Anti-Inflammatory Diet

1 free CE credit for D7 members*

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FROM THE EDITOR

Happy New Year! We all hope that each of you have successfully ridden the wave of COVID and the challenges it has brought to our shores. Keep safe; recent NYS COVID guidelines are inside.

Good Faith Estimates just another form from the permanent Washington bureaucracy or a valuable program to assure greater patient responsibility of paying fairly for the medical care they need? We want you to decide. Look for the link of an editable PDF of this required GFE document.

H.R. 2642 still needs support and passage. See inside for updates to the progress of the bill and for the link to contact Representative Lee Zeldin to ask him to cosponsor it. At this time, he has not signed onto our profession's bill as a co-sponsor.

For those that joined the district for the holiday party we have photos on page 5. Remember to review the NYSCA Spring Convention ad and sign up to get the best discount for attending the premier CE event on the east coast this year.

We include an ad for NYSCA membership inside every edition of the newsletter. We are looking to have a greater percentage of non-affiliated DC's join our ranks. Please send our newsletter to a colleague or to your associates and ask them to contribute to the protection of our profession with NYSCA membership.

Our entire board hopes that we all have a better year than last and that our efforts this year contribute to your successes as NYSCA members. I hope you all enjoy this edition of our district's newsletter.

IN PERSON MEETINGS - Radisson Hotel Hauppauge - 8 PM

February 16th **Technique Tips**

Member's Sharing Chiropractic Techniques

March 16th

Dr. Craig Rubenstein Vertigo Management

1 free CE credit for D7 members* - nonmembers \$20 cost

April 8-10th

NYSCA Spring Convention more info on page 11

April 20th **TBA**



New Federal Mandate: Good Faith Estimates

The Illinois Chiropractic Society shared with the ACA and NYSCA

As you may be aware, the No Surprises Act was passed at the end of 2020 as a part of the Consolidated Appropriations Act of 2021. Initially most experts believed this act applied only to facility-based providers; however, the recent finalization of Part II of the rules has a specific portion that applies to all health care providers.

One of the goals of the No Surprises Act is to ensure that patients do not receive health care bills that exceed their awareness or expectations. Another key provision pertains to “good faith estimates” and this will apply to nearly all chiropractic offices beginning on January 1, 2022. The No Surprises Act is comprised of two major parts. Part I is entitled: “Requirements Related to Air Ambulance Services, Agent and Broker Disclosures, and Provider Enforcement.” Part II is entitled: “Requirements Related to Surprise Billing;” only Part II will apply to most chiropractic physicians.

The purpose of Part II is to better inform patients about the cost of care and requires a “Good Faith Estimate.” This will require all chiropractic physicians whether insurance based, in-network, out of network, or cash, to make an initial determination for all patients whether a good faith estimate is required. Although the No Surprises Act requires Good Faith Estimates (GFE) for both self-pay and insurance-based patients, HHS only issued rules for the patients who are uninsured or self-pay patients. Insured

patients are excluded by HHS at this time because the infrastructure is not available to provide meaningful information to the patient. This regulation will impact your office in some way, since the minimum requirements will include required questions of patients, posters in your office, additions to your website, and paperwork for Medicare patients. This information is based on the Interim Final Rule that was active on 10/7/2021 but is subject to change because it is still in the comment period. And interpretation is based on the best information currently available. Some of these requirements MAY change from future updates to the rule or based on court rulings. Nonetheless, these requirements are in place and active beginning January 1, 2022. Patients will be fully aware of these rights since the requirements will be in place for all health-care providers.

One of the key concepts of the no Surprises Act is to ensure that patients do not receive medical bills that are greater than they anticipate. Although the law mostly focuses on large surprises from air ambulance and non-participating physicians at participating hospitals, they also want patients to know in advance the cost of services being rendered in non-emergency settings. The law goes a step further than simply requiring a price list of services offered; instead, providers must provide during scheduling (or before scheduling, if the patient requests) a clear list of services (with prices)

anticipated for the specific patient.

Good Faith Estimates (or GFEs) have required elements:

- A list of all reasonably expected services for the scheduled visit with all prices,
- CPT codes and ICD-10 codes,
- Patient and provider identifying information,
- Appointment date (if scheduled), and
- Several disclaimers

Providers must present the Good Faith Estimate in writing, but they can also present it orally. HHS has clarified that providers can satisfy the written requirement through electronic means, such as email (if requested) or a patient portal. However, they clarify that the patient MUST have the ability to “both save and print” the GFE.

Currently, only uninsured, or self-pay patients will be entitled to a GFE. The rules define uninsured (or self-pay) individual to mean an individual who does not have benefits for an item or service through their health insurance.

In short, a “self-pay” individual:

- Does not have health insurance, OR
- Has health insurance, but is not billing the services being considered, OR

Continued on page 7

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SNAPSHOTS FROM D7 ANNUAL HOLIDAY PARTY

"IT WAS SUCH A GREAT TIME AT THE ANNUAL HOLIDAY PARTY. THANKS FOR COMING AND CELEBRATING ANOTHER GREAT YEAR FOR DISTRICT 7... THANKS TO THE BOARD FOR ORGANIZING THE EVENT!"

Dr. Fasulo



Medicare Patient Access to Chiropractic: H.R. 2654

Legislation championed by ACA to increase Medicare coverage of chiropractic services has been introduced in the U.S. House of Representatives.

The Chiropractic Medicare Coverage Modernization Act (H.R. 2654) would allow Medicare beneficiaries access to the chiropractic profession's broad-based, non-drug approach to pain management, which includes manual manipulation of the spine and extremities, evaluation and management services, diagnostic imaging and utilization of other non-drug approaches that have become an important strategy in national efforts to stem the epidemic of prescription opioid overuse and abuse.

H.R. 2654:

Provides patient access to all Medicare-covered benefits allowable under a chiropractor's state licensure.

Requires that DCs complete a documentation webinar.

Appropriately defines a Doctor of Chiropractic (DC) as a "physician" in the Medicare program.

Is bipartisan legislation, introduced by 16 cosponsors from both political parties.

TAKE ACTION NOW

Contact Lee Zeldin

Ask for his support of The Chiropractic Medicare Coverage Modernization Act (H.R. 2654)

If you live here call Mr. Zeldin today!

Print out the information about the bill and visit his office and ask for his support of this important legislation.

<https://www.congress.gov/member/district/lee-zeldin/Z000017>

Write Lee today @

<https://zeldin.house.gov/zip-code-lookup?form=/contact/email-me>

HELP - D7 members let's help the ACA get Mr. Zeldin, a chiropractic friend, onboard this important legislative initiative.



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NEW TIP SHEET: Managing Negative Online Reviews

Negative online reviews are inevitable, but our new resource can help you manage them appropriately and effectively.

Responding to negative reviews can be fraught with complications, especially since many future patients will rely on those reviews when making a decision about care. In some cases, not responding is the right option. Most of the time, however, an earnest and empathic response is justified.

This tip sheet will address the do's and don'ts for responding to negative reviews of your practice or care.



Negative Online Reviews Are Inevitable. Here's How to Manage Reviews Appropriately and Effectively.

Regardless of the amount of time, attention and empathy you show every patient in your practice, one or two will leave an appointment dissatisfied, even disgruntled. Sometimes that dissatisfaction may have nothing to do with your care, perhaps it was due to a bad experience with an office staff member or a dispute with their own health insurance company.

But thanks to the hundreds of consumer review sites available on the Internet – not to mention Facebook where a negative review is seen by the patient's friends and family – that patient can easily vent their dissatisfaction with your practice in a place for the world to see. These online reviews should not be ignored. Here's why:

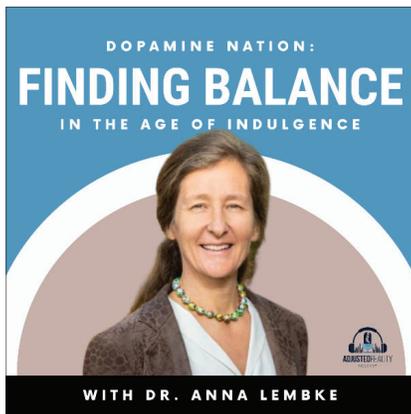
- 93% of consumers used the Internet to find a local business last year
- 87% of consumers read online reviews for local businesses
- 71% of patients use online reviews as the very first step to finding a new doctor
- Healthcare Industry ranks 3rd in most-read online reviews, behind restaurants and hotels
- 66% of patients feel it's at least "moderately important" for providers to respond publicly to online reviews

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New Podcast Episodes



Season 2 of the F4CP's podcast, Adjusted Reality, trusted by the adjusted, has officially launched and has SIX, new consumer-friendly episodes for you to share with your patients.

Most recently, the F4CP interviewed Dr. Anna Lembke for the second time, to talk about her latest book, Dopamine Nation: Finding Balance in the Age of Indulgence.

[Click here to listen to the podcast](#)

[How to Utilize F4CP's Podcast with Your Patients](#)

NEW FEDERAL MANDATE: GOOD FAITH ESTIMATES CONTINUED FROM PAGE 3

- Has health insurance but does NOT have coverage for the services being considered (i.e., has Medicare, but needs and exam, x-rays, modalities, or therapies from a chiropractic physician).

This will only apply if providers know the person does not have coverage for the services and items being considered. Note that under bullet point two above, an individual with a high deductible plan who counts payment for the service toward their deductible would not be self-pay; however, an individual with a high deductible plan who declines to apply their out-of-pocket payment to their deductible is self-pay.

The staff person making the appointment is required to inquire about the information in all the bullet points above, and, if the patient is a self-pay individual, notify them about the GFE (see "How Will Patients Know About the GFEs?" Section).

Important Note About Medicare: Since the rule's requirement includes "an individual who does not have benefits for an item or service under a" health insurance plan (including Medicare), it is believed that providers will have to provide a GFE to Medicare patients for exams, modalities, and therapies.

How Will Patients Know About the GFEs? HHS requires providers to inform patients of their rights to receive or request a Good Faith Estimate. As a result, providers are required to notify patients in three specific, clear, and understandable ways: 1) A notice prominently displayed in the office where patients can see the posting (download), 2) A notice prominently displayed (and easily searchable from a public search engine) on your website (download), and 3) Orally when a patient schedules an item or service or when questions about costs occurs. Health care offices must provide all three types of notices. HHS has developed a template posting for the in-office posters. Additionally, you can use the same language in your website posting. Do not simply upload the pdf to your website. Instead, you should make sure the language is in html format. This will ensure the "easily searchable from a public search engine" requirement is met.

Please remember that the rules require pro-

Continued on page 12



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Department of Health

New York State Department of Health Releases Updated Recommendations for Healthcare Workers Related to COVID-19 Exposure and Infection

The rapid proliferation of the Omicron variant of the Coronavirus has moved the Centers for Disease Control and Prevention (CDC) and New York State Department of Health (DOH) to again revise their recommendations related to COVID-19.

Whether or not you need to isolate or quarantine depends upon several factors, including (but not limited to) your exposure, vaccination status, and symptomatology.

Please consider the following guidance from the DOH dated December 24, 2021 in order to make the most informed decision. Always check for contemporaneous information from the CDC, NYS DOH, and your local Department of Health for any additional recommendations.

RETURN TO WORK / ISOLATION GUIDANCE - 12/24/21 - NY.GOV

[HTTPS://CORONAVIRUS.HEALTH.NY.GOV/SYSTEM/FILES/DOCUMENTS/2021/12/RETURN-TO-WORK-ISOLATION-GUIDANCE_12-24-21.PDF](https://coronavirus.health.ny.gov/system/files/documents/2021/12/return-to-work-isolation-guidance_12-24-21.pdf)

In summary, the isolation and quarantine periods have been shortened to ease the burdens on the critical areas of our healthcare system and the economy, including the Chiropractic profession.

It is also noteworthy that guidelines on return to work specify that cloth masks are not acceptable and KN95 or a properly worn surgical mask must be used.

In addition, the CDC has provided the following for quarantine and isolation as it relates to the general population.

Isolation / Quarantine Guidance - 12/27/21 - CDC.gov

<https://www.cdc.gov/media/releases/2021/s1227-isolation-quarantine-guidance.html>

PRESIDENT'S MESSAGE CONTINUED FROM PAGE 1

credit but even more important than the credit, it will likely re-energize your commitment to help your patients overall health by incorporating sound advice about nutritional changes to assist the bodies innate healing process. The supplement business in the US, according to IBIS, is expected to be over 21 billion in 2022 and the market size of the Online Vitamin & Supplement Sales industry in the US increased faster than the economy overall. Basically, if you are not incorporating nutrition in your practice, you are likely missing a huge revenue source, so make it a point to listen in to Dr. Levin's presentation.

Exciting news about our February general meeting, it will be a different format, but one I believe our members will embrace. We are calling it Technique Tips and it will be a chance to show off and share the chiropractic techniques you use to help your patients. Show us, for example, how you treat the migraine patient, the TMJ patient, the radiculopathy patient, etc. It is a chance to learn some new techniques as well as brush up on some chiropractic insights you may have forgotten over the years.

Our March meeting will bring Dr. Craig Rubenstein, a NYSCA member and excellent doctor and speaker, discussing treatment for Vertigo. This presentation is also eligible for 1 CE credit. As we all see in our practices, vertigo is a widespread problem amongst the population. Let's treat the cause of vertigo chiropractically, instead of referring to the neurologist who is treating symptoms alone.

Looking ahead to April, the NYSCA convention will be taking place from April 8-10. Speakers will be covering topics from billing, collections, philosophy, techniques and more. I certainly am looking forward to getting together again with the NYSCA doctors, checking out the vendors and enjoying some casino fun. Mark your calendar today!

A special Shout Out to our new Gold Sponsor: NSPC: the leaders in minimally invasive brain and spine surgery. We are so thrilled to have them as a sponsor, and I and the NYSCA District 7 members thank Dr. Phil Facquet for his efforts on making this happen.

And, as usual, a Zoom option will be made available for the general meeting. Please send Dr. Joe Merckling an email to request the link.

So much to look forward to and as Vince Lombardi once said: "individual commitment to a group effort, that is what makes a teamwork, a company work, a society work, a civilization work." I Wish you, your families, your practices and District 7 the very best in 2022, and I look forward to even more involvement from our members. Tuning in to the general meetings can make or break your practice, so come on by or zoom in.

Your President,

Dr. Joanna Fasulo

We've got you covered, from head to toe!

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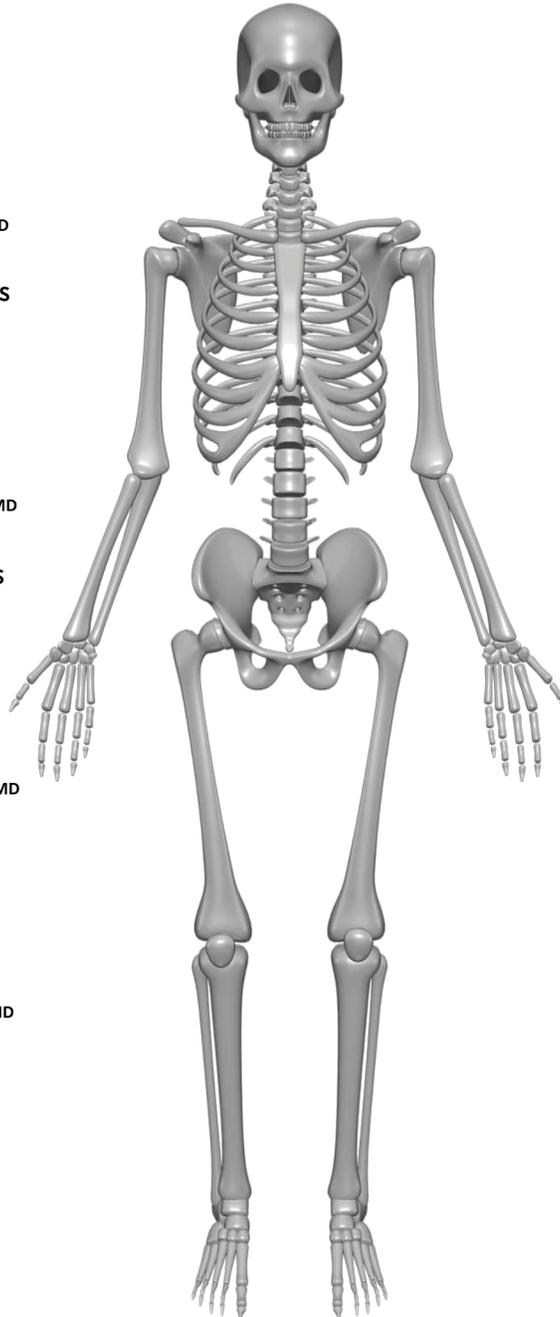
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Presenting the New York State Chiropractic Association

2022 Spring Convention

April 8-10, 2022 at Mohegan Sun Casino & Resort

Sky Convention Center | 1 Mohegan Sun Blvd, Uncasville, CT

It is our pleasure to announce and formally invite you to participate in the NYSCA 2022 Spring Convention! We look forward to seeing you in person at our next live event to be held in the Sky Convention Center at Mohegan Sun!

Earn up to 16 CE Credits over 3 days and across 2 tracks!

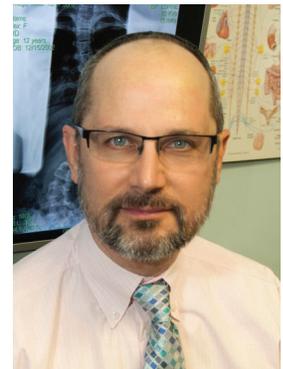
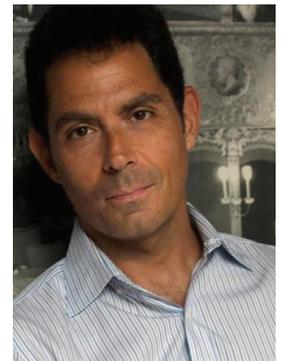
We encourage you to arrive early for the Friday session to check in and visit with our event exhibitors. Classes on Friday will be from 2pm-6pm and will offer up to 4CE, followed by our Welcome Reception. The Saturday session will be from 8am-6pm and will offer up to 8 credits, along with a banquet luncheon and dessert reception with sponsors and exhibitors. The Sunday portion will be from 8am-12pm and will offer up to 4 credits.

[Event Agenda coming soon](#)

[Register Online](#)

[Visit the Virtual Expo](#)

Earn up to 9 Cat1 credits, Up to 14 out of state credits. Save \$100 off "door" prices when you register by 01/14/2022. Special pricing for Association Members. Registration MUST be received by 5pm on Friday, 04/01/2022.



Scheduled speakers include: Robin Stein DC (not pictured)†, Joseph Merckling DC†, OUM-Sponsored Speaker (not pictured)†, Lev Lewin Esq (not pictured— Lewin & Baglio PC), Jennifer Illes-Rector DC (Footlevelers), Justin Hafner (Kinotek), Karlos Boghosian DC, Angelo Ippolito DC, James Walters DC, Kelley Humphries DC (NCMIC)‡, Steven Conway DC (NCMIC)‡, Lisa Bloom DC, Andrew Strauss DC (CLEAR Institute)

*CE Credit for select courses available for NY licensees only. † Attend OUM's seminar for a total of 2 hours on Friday 04/08/2022 to receive up to a 10% discount off your OUM policy ‡ Attend NCMIC's seminar for a total of 8 hours on Saturday 04/09/2022 to receive a discount for 3 years on the renewal of your NCMIC malpractice insurance premium. 5% discount for full-time DCs; 2.5% discount for part-time DCs premium.

Policy Statement: The NYSCA makes every attempt to offer programs as publicized. We nevertheless reserve the right to alter and/or adjust program details, including but not limited to dates, locations, times, instructors, and presentation sources and sequences. Please visit the NYSCA event webpage to review our Registration and Cancellation policies, along with accommodations details.

License Renewal: Continuing education credit (CE) is provided by Northeast College of Health Sciences. Pending for NY, PA, NC, FL. Pre-Approved: CO, CT, DE, DC, ID, IL, IN, IA, MA, MD, MS, MT, NE, ND, NH, NJ (DC only), OH, OR, RI, SC, UT, VT, VA, WA, WY, Puerto Rico, Canadian Provinces (except AB)

This seminar is valid for CE credits in "pre-approved" states, so long as it falls within the scope of practice as outlined by the corresponding state board. It remains attendees' responsibility to contact the state board(s) from which they seek continuing education credits for purposes of ensuring said board (s) approves both the delivery method and content as they relate to this event. Neither a speaker's or exhibitor's presence at said event, nor product mention or display, shall in any way constitute Northeast College endorsement. Northeast College's role is strictly limited to processing, submitting, and archiving program documents on behalf of course sponsors.



viders to notify self-pay patients that they are entitled to a Good Faith Estimate.

How to Implement the New GFE Requirements These are examples of when a provider must give a GFE to patients.

Example 1: Patient calls to schedule an appointment for a new injury (no treatment plan) When a patient calls to schedule an appointment for a new injury and no treatment plan is yet in place (i.e., no Good Faith Estimate already exists), then the staff member taking the appointment must take specific steps at the time the appointment is being made:

1) Ask patients if they have health insurance and for the name of their insurance carrier/plan. a. If patients have health insurance, then ask if they intend to bill health insurance for the services.

2) If the patient does not have insurance, does not intend to bill insurance, or does not have coverage for the intended item or service (i.e., examination and therapies for a Medicare patient), then the patient should be notified that they have the right to receive a Good Faith Estimate (see Required GFE Notifications section above).

3) Best Practice – Notify the patient on the phone of the expected charges for their appointment. This will satisfy the oral requirements of the law. For example, if you typically perform an exam, x-rays, and adjustment on the first visit, then tell the patient, “Since this is a new injury, the doctor will perform an examination, may also need to take x-rays, and may perform an adjustment to treat your problem. That means that your first visit will cost between [exam cost] to [exam, x-rays, and adjustment cost]. We have this information in writing available to you, and you can pick it up anytime, including on the day of your visit.”

4) Complete the GFE form and place it in the patient’s file. When the patient arrives and requests a copy, simply make, and provide a copy of the GFE form already in their file.

Example 2: After the doctor determines the proper course of treatment and presents the treatment plan to the patient (i.e., report of findings), this is the appropriate time to also present the patient with a Good Faith

Estimate. Although many of our doctors already require patients to sign a financial policy and other forms when patients are presented with treatment plans, for self-pay and uninsured patients, doctors will also have to present a form with the required GFE elements.

When is the Good Faith Estimate Given to Patient? The deadline for giving a patient the Good Faith Estimate (GFE) is based on when the patient makes a request for one, or when an appointment is scheduled.

Use this list that is based on the date an appointment scheduled (in business days):

- 0 Days in Advance – Provide GFE 3 business days after the date of scheduling, or
- 3 – 9 Days in Advance – Provide GFE 1 business day after the date of scheduling, or
- Under 3 Days in Advance* – GFE is required if requested, or
- No appointment scheduled – Provide GFE 3 business days after the date the patient requests the GFE.

* Note: Currently, experts are divided on interpreting whether a GFE is required at all if the appointment is scheduled less than 3 business days before the appointment time. However, because no court or agency has specifically ruled on this issue, prudent practice points toward providing a GFE when requested in these situations.

Other Services Provided by Outside Entities (i.e., lab work) Interestingly, the rule requires that providers initiating the appointment gather fee information from other potential providers (called co-providers) that will bill patients directly. Although this requirement will most impact providers in hospital settings, the requirement applies to chiropractic physician offices, as well. The most common types of co-providers situations in chiropractic physician offices would be labs (typically functional medicine), radiologist readings, and physical therapy (independent PTs). As a physician, you will need to use your professional judgment to make the best determination regarding what types of potential co-providers might be needed for a particular patient. The rules require that the “provider or facility contact all applicable co-providers and co-facilities no later than one business day after the request for the good faith

estimate is received or after the primary item or service is scheduled, and request submission of expected charges for items or services that meet the requirements for co-providers and co-facilities. This means that you are required to contact co-providers quickly to determine their potential charges. Co-provider amounts are required to be included in the Good Faith Estimate statement to the patient. Example: If you utilize functional medicine approaches in your practice and your typical patients require lab work that is billed by the lab, then the anticipated lab charges should be included in your Good Faith Estimate for the patient.

GFE Required Elements and Downloadable Form: The law and rules require that the Good Faith Estimate form include extremely specific information. Here is a full list of required elements:

- Patient name and date of birth;
- Primary service with an understandable description;
- Date of primary service;
- A full list of items or services “reasonably expected to be provided;”
- Address, name, NPI, and TIN of each provider who will be furnishing the services;
- Other items or services that require separate scheduling and that are “expected to occur before or following the expected period of care for the primary item or service.”

*ICD-10 diagnosis codes and CPT or HCPCS codes for services and diagnosis codes are probably not needed until following an initial examination; however, are included on the sample GFE forms.

There must be a disclaimer directly above this list indicating that separate Good Faith Estimates will be made available (upon scheduling or request) with the appropriate details.

- A disclaimer indicating that there may be additional items or services that must be scheduled or requested separately and are not included in this good faith estimate;
- A disclaimer that the form includes only an “estimate of items or services reasonably expected to be furnished at the time of its issuance, and that actual items, services, or charges may differ from the good faith estimate;”

Continued on page 16



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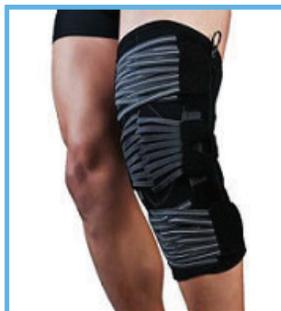
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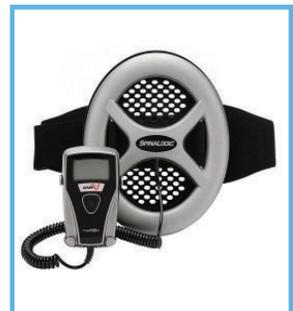
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Our Daily Fred

A daily email for your personal development, empowerment, and amusement

Fred Ford LifeSuccess Consultant Newsletter

Today's thoughts are taken from "Think and Grow Rich" by Napoleon Hill

Those who have cultivated the HABIT of persistence seem to enjoy insurance against failure. No matter how many times they are defeated, they finally arrive at the top of the ladder. Sometimes it appears that they have a hidden Guide whose duty is to test them through all sorts of discouraging experiences.

Freditorial:

The word that jumped out at me when I read this excerpt was "cultivated." In other words, if persistence is not something that comes naturally to you—if you tend to give up too easily or if you are too easily discouraged—you can, and SHOULD cultivate the habit of persistence. It all comes down to the age-old phrase: if at first you don't succeed, try try again!

If you don't possess persistence, you will not achieve noteworthy success in any calling. CULTIVATE the habit of persistence. Set a worthwhile goal and take action daily to bring that goal into your physical reality. You CAN and WILL win the battle if you will simply refuse to quit!

JOIN DAILY FRED



**Please Keep
Dr. Jerry Bertuch
in your Thoughts
and Prayers**

OBITUARY

Malcolm Levitin, DC (01/11/2022)

It is with great sadness that we inform you of the passing of Dr. Malcolm Levitin of Rockville Center NY. Dr. Levitin was a longtime member of NYSCA District 6, a prior District 6 Delegate, and a prior member of the NYSCA Board of Directors. He also was a very active member of the NYSCA Convention Committee. We are greatly saddened by this loss and our thoughts and hearts remain with the Levitin family at this very difficult time.

Services were held January 11, 2022 at the Star of David Memorial Chapels.



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Thank you for your support of the Chiropractic Profession and NYSCA. This newsletter is the official publication of the NYSCA Suffolk District. This is a medium for open and responsible dialogue on issues germane to the chiropractic profession. Individuals are encouraged to contribute items of interest.

Opinions do not necessarily reflect the views of the NYSCA Suffolk District. The NYSCA Suffolk District does not endorse or approve any statement or fact or opinion, nor is it responsible for editorial or advertising presented within the Newsletter.



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NEW FEDERAL MANDATE: GOOD FAITH ESTIMATES

CONTINUED FROM PAGE 12

- A disclaimer that informs the patient of their right to initiate the patient-provider dispute resolution process if the actual billed charges are "substantially in excess of the expected charges included in the good faith estimate," including instructions for where a patient can find information about how to initiate the patient-provider dispute resolution and that dispute process will not impact the quality of care provided; and
- A disclaimer that the good faith estimate is not a contract and does not require the patient to obtain the items or services from any of the providers or facilities identified in the good faith estimate.

Each of the above elements must be included; however, HHS does not require a specific form although they have developed a usable form and it may be modified but must contain all the elements.

As indicated above, these requirements are in place as of January 1, 2022, and should not be ignored or postponed. Additionally, the information in this article is based on the Interim Final Rule, which was active on October 7, 2021, but could change after the comment period. Additionally, these interpretations are based on the best information currently available. Some of these requirements MAY change from future updates to the rule or based on court rulings. However, providers should implement now.

This information has been provided by the Illinois Chiropractic Society and shared with the ACA for dissemination to Delegates and members/member associations. We thank the ICS for their diligence and collegiality in sharing this information.

Disclosures, notice & consent

- Standard notice & consent forms for nonparticipating providers & emergency facilities regarding consumer consent on balance billing protections ([Download Surprise Billing Protection Form](#)) (PDF)
- Model disclosure notice on patient protections against surprise billing for providers, facilities, health plans and insurers ([Download Patient Rights & Protections Against Surprise Medical Bills](#)) (PDF)
- Requirements for including federal agency contact information and website URL on certain documents ([Download Memo of Requirements for Plans, Providers and Facilities](#)) (PDF)
- <https://www.cms.gov/files/zip/cms-10791.zip>

Why are the GFE documents important?

Editor

The No Surprise Act sets up a way for patients to dispute your bills for charges over \$400 which are over the GFE document estimate. For a \$25 non-refundable fee they can initiate the dispute by mail, fax or online. Once started even if your patient agrees to settle you will credit \$12.50, half of the application fee, to the patient. I would bet that if you miss a step in this paperwork process your practice will eat the entire bill. Here is a link to review this from the patient's point of view: <https://www.cms.gov/newsroom/fact-sheets/no-surprises-understand-your-rights-against-surprise-medical-bills> and <https://www.cms.gov/nosurprises>. An example of the form with disclosure statements: <https://www.cms.gov/files/document/good-faith-estimate-example.pdf>



Dr. Sathish Subbaiah

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Referred to NYSCA by:		All fields required unless otherwise specified.	

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Degree(s):	
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NY Chiropractic License Number:	Date of Issuance: (MM/DD/YYYY):

Personal Information

Date of Birth:	Home Phone (opt):	Mobile Phone (opt):
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<input type="checkbox"/> 3 rd Year Licentiate – up to 4 years from date of licensure	\$360 or \$30/month
<input type="checkbox"/> 4 th Year Licentiate – up to 5 years from date of licensure	\$480 or \$40/month
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