



NYSCA SUFFOLK COUNTY

District 7

NOVEMBER 2023 NEWSLETTER



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Tuesday, November 14
6:30-8:30 PM

District 7 Monthly Meeting for
Members Only Event at
Fusion Solutions Cadaver Lab

190 DUFFY AVENUE, HICKSVILLE

TO REGISTER

What's Inside

President's Message
Member Spotlight
Insurance Updates
Chiropractic Care and
Veterans Health
Prepare Your Office for 2024
Legislation Updates
D7 Photo Gallery
Sponsor Spotlight

Calendar of Events

Tues., Nov. 14 6:30-8:30 PM

D7 Monthly Meeting
for Members Only Event at

Fusion Solutions Cadaver Lab
190 Duffy Ave, Hicksville, NY

Wed., Dec. 13 7:00-10:00 PM

D7 Holiday Party at Mezza Luna
644 Vanderbilt Motor Pkwy, Hauppauge

Wed., Jan. 13 8:00 PM

D7 Monthly Meeting
Speaker To Be Announced
Radisson Hotel, Hauppauge

Wed., Feb. 21 8:00 PM

D7 Monthly Meeting
The Force Law Firm Pitfalls of Waiving
Patient Balances (1 CE)
Radisson Hotel, Hauppauge

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PRESIDENT'S MESSAGE



Dear D7 Doctors,

Thank you for taking the time out of your busy practices to read our monthly newsletter. Our goal for this newsletter and our monthly meetings is to keep you informed, inspire you in your practice, create networking opportunities and build a chiropractic community.

Last month our speaker was Mr. Manfredi from Pomares Law Firm. I would personally like to thank him for sharing his knowledge on No Fault and Personal Injury Collections. He shared valuable insights on how to retrieve money from the insurance carriers even after an IME denial, which has, not surprisingly already showed me how to improve my arbitration collections!

I would also like to thank Dr. Sharma, Director of Interventional Spine Pain Solutions, for giving us last month's sponsor article, which was a comprehensive article on The Science of Radiofrequency Ablation. District 7 is very fortunate to have a doctor of his caliber just a text or phone call away when our patients are in need of his interventional spine pain services. Please remember him when a Pain Management intervention is needed.

Our next D7 event will be held in Hicksville at the Cadaver Lab on Tuesday, November 14 and will be presented by Dr. McHugh. Please note that this will stand in place of our general meeting at the Radisson in Hauppauge This is a District 7 Members Only event and space is limited to 25 and running out. If you haven't registered yet...you best hurry up! A link was provided in last month's newsletter.

Moving into the Holiday Season 2023, we will hold our annual Holiday Party on December 13 at Mezza Luna in Hauppauge. We look forward to seeing you there as well as many of our district's Sponsors, including our current Gold Sponsors; NSPC, OALI, NeuroCare Long Island and Spine Pain Solutions. This event is welcome to all members and is always a great time so close a bit early on that day and spend time with your colleagues and gold sponsors!

Finally, let's take a moment to welcome Dr. Bruce Berns and Dr. Brian Yonks as returning members to D7. We look forward to their participation!

As always, it is my pleasure and honor to be your district's President,

Best,
JoAnna Fasulo DC

Member Spotlight



Chiropractic equals quality of life! This month we spotlight Dr. Shirley Espinoza.

After a childhood plagued by migraine headaches and other ailments that went had gone uncorrected, Shirley suffered a fall when she was 24 years old. Unable to care for herself, she found an old-time chiropractor from Palmer who gave her back her "quality of life." It was at this moment that she decided to do exactly what he did; truly help people like herself who were being told "there's nothing wrong with you but here take this drug."

Dr. Espinoza praises Chiropractic for saving her life and has even more faith since she experienced a head-on collision in 2008 and relied on chiropractic to restore her life. **Shirley knows firsthand that chiropractic brings, gives and is life.**

Practicing from her home in Lindenhurst since 1994, Shirley has been married for 37 years and raised a daughter and a son. The oldest, her daughter, was born while Shirley was still in school at Palmer and she was pregnant with her son while she was still there - **a family born and raised in the chiropractic sphere!**

Dr. Espinoza cites her proudest chiropractic case as a 35 year old woman who was hit by a car. This patient spent 8 long months not able to walk, sleep, or eat, in severe pain with chronic headaches, and suffering severe loss of digestive and bowel function. All of this left the patient unable to care for her 4 children. Through chiropractic care, Shirley was able to help this patient restore her health and strength and be there for her family once again.

When not enhancing patients' health through chiropractic, Shirley enjoys anything to do with the outdoors and travel. Her perfect day is any that involves sand, sun, salt, and water. Travel is also a passion and Shirley has spent 37 years travelling to from Ecuador where her husband's family lives. She's also gone on more than one SEA kayak expedition to Greece and visited the Galapagos Islands. And now, Shirley is planning trips to Portugal and Ireland for next year - Shirley is a world traveler in the truest sense!

Shirley is a past member of NYSCA who recently returned because she missed the value she got from each meeting - always finding an important nugget to take back to her practice.

Dr. Espinoza, we are glad to have you as a member of this fantastic district!

UP TO SPEED ON INSURANCE

2023 MEDICARE PARTS A & B PREMIUMS AND DEDUCTIBLES 2023 MEDICARE PART D INCOME-RELATED MONTHLY ADJUSTMENT AMOUNTS

On September 27, 2022, the Centers for Medicare & Medicaid Services (CMS) released the 2023 premiums, deductibles, and coinsurance amounts for the Medicare Part A and Part B programs, and the 2023 Medicare Part D income-related monthly adjustment amounts.

Medicare Part B Premium and Deductible

Medicare Part B covers physician services, outpatient hospital services, certain home health services, durable medical equipment, and certain other medical and health services not covered by Medicare Part A.

Each year the Medicare Part B premium, deductible, and coinsurance rates are determined according to the Social Security Act. The standard monthly premium for Medicare Part B enrollees will be \$164.90 for 2023, a decrease of \$5.20 from \$170.10 in 2022. The annual deductible for all Medicare Part B beneficiaries is \$226 in 2023, a decrease of \$7 from the annual deductible of \$233 in 2022.

The 2022 premium included a contingency margin to cover projected Part B spending for a new drug, Aduhelm. Lower-than-projected spending on both Aduhelm and other Part B items and services resulted in much larger reserves in the Part B account of the Supplementary Medical Insurance (SMI) Trust Fund, which can be used to limit future Part B premium increases. The decrease in the 2023 Part B premium aligns with the CMS recommendation in a May 2022 report that excess SMI reserves be passed along to people with Medicare Part B coverage.

Beginning in 2023, certain Medicare enrollees who are 36 months post kidney transplant, and therefore are no longer eligible for full Medicare coverage, can elect to continue Part B coverage of immunosuppressive drugs by paying a premium. For 2023, the immunosuppressive drug premium is \$97.10.

Medicare Open Enrollment and Medicare Savings Programs

[**READ MORE**](#)

Work Comp Corner

DME FEE SCHEDULE UPDATE

In keeping with the goals of the Workers' Compensation Board (Board) to provide quality and efficient care to injured workers, the Board plans to propose an update to adjust the Official New York Workers' Compensation Durable Medical Equipment (DME) Fee Schedule and add additional codes.

This proposal will be published soon in the State Register and on the Board's website. A Subject Number will be issued when it is published.

FEE SCHEDULE

ONBOARD PAR UPDATE became Live as of 10/24/2023

A series of updates are now available in OnBoard! These updates may result in providers seeing new information as part of prior authorization request (PAR) responses, and this email serves to provide a heads up as these changes are made.

[**MORE INFO**](#)

CHIROPRACTIC CARE AND VETERANS HEALTH

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70-110 lbs.

WHICH CAN CAUSE AN INCREASED RISK OF PAIN AND INJURY IN THE SPINE AND EXTREMITIES.

CHIROPRACTORS WORK TO REDUCE THE PAIN ASSOCIATED WITH INJURIES WITHOUT THE USE OF DRUGS OR SURGERY.



Foundation for
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Source: J Hand Ther

NEARLY 50% OF MILITARY SERVICE MEMBERS EXPERIENCE ONE OR MORE INJURIES EACH YEAR IN SERVICE.

AS A DRUG-FREE AND NATURAL APPROACH, CONSIDER CHIROPRACTIC CARE AS YOUR FIRST-LINE DEFENSE.

Source: Army Public Health Center

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PREPARE YOUR OFFICE FOR 2024

ANNUAL MEDICARE FRAUD AND ABUSE TRAINING WEB-BASED TRAINING COURSE

COURSE LINK

ANNUAL NYS SEXUAL HARASSMENT PREVENTION TRAINING

Model Prevention Policy

Every employer in the New York State is required to adopt a sexual harassment prevention policy. An employer that does not adopt the model policy must ensure that the policy that they adopt meets or exceeds the following minimum standards.

MORE INFO

KEEP UP TO DATE WITH GOOD FAITH ESTIMATES

Began in 2022

MORE INFO

ANNUAL CULTURAL COMPETENCY TRAINING (some insurance companies such as Fidelis require it)

MORE INFO

CHIROPRACTIC LEGISLATION IN THE WORKS



AMERICAN
CHIROPRACTIC
ASSOCIATION

H.R. 1610 | The Chiropractic Medicare
Coverage Modernization Act



New Cosponsors

Linda T. Sánchez (D-CA)
Lloyd Smucker (R-PA)
Ann M. Kuster (D-NH)
Jimmy Panetta (D-CA)
Teresa Leger Fernandez
(D-NM)

David Rouzer (R-NC)
James Comer (R-KY)
Robert J. Wittman (R-VA)
Sheila Jackson Lee (D-TX)
Roger Williams (R-TX)
Nikema Williams (D-GA)

Take Action at aca.today.org/takeaction

House, Senate Reintroduce Bill to Increase Medicare Coverage of Chiropractic Services

Arlington, VA – Both the U.S. House of Representatives and the U.S. Senate today reintroduced legislation to increase access to Medicare-covered services provided by doctors of chiropractic. The Chiropractic Medicare Coverage Modernization Act (H.R. 1610 / S. 799) would bring Medicare's coverage of chiropractic into alignment with most other federal programs and private health plans, giving seniors improved coverage of non-drug treatments to alleviate pain and improve function.

The legislation was introduced by Reps. Gregory Steube (R-Fla.), Brian Higgins (D-N.Y.), Mark Alford (R-Mo.) and John Larson (D-Conn.) in the House and Sens. Richard Blumenthal (D-Conn.) and Kevin Cramer (R-N.D.) in the Senate. Both bills were introduced with a number of bipartisan original cosponsors. An identical bill that expired last year in Congress achieved more than 150 cosponsors in the House, split almost evenly between Democrats and Republicans, and six cosponsors in the Senate.

READ MORE

NYSCA District 7's October Meeting



Michael Manfredi, ESQ.-The No-Fault Arbitration Process



Dr. Robin Stein won the monthly Raffle of 1 gallon of Stopain Lotion!



We are sad to inform you that on 10/23/23 the wife of our dear friend and colleague David Bagshaw has passed away. Nancy was a beloved educator for the Bridgehampton School District for many years. Nancy, we will miss you smile.



WELCOME BACK

Returning New Members

Bruce Berns, DC

Brian Yonks, DC

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Hip Arthroscopy

Michael J. Sileo, MD, FAAOS

What is Arthroscopy?

Arthroscopy is a minimally invasive surgical procedure that gives doctors a clear view of the inside of a joint. During arthroscopy, the surgeon inserts a small camera, called an arthroscope, into the joint. The camera displays pictures on a high-definition screen, and the surgeon uses these images to guide specially designed small surgical instruments.

Advances in arthroscopy over the years have allowed surgeons to repair and remove injured tissue that previously could only be done utilizing larger and more invasive methods. Arthroscopy has been performed for many years, most commonly for the treatment of shoulder and knee disorders. As techniques have improved and been refined, surgeons are now treating a wide variety of disorders of the hip joint arthroscopically.

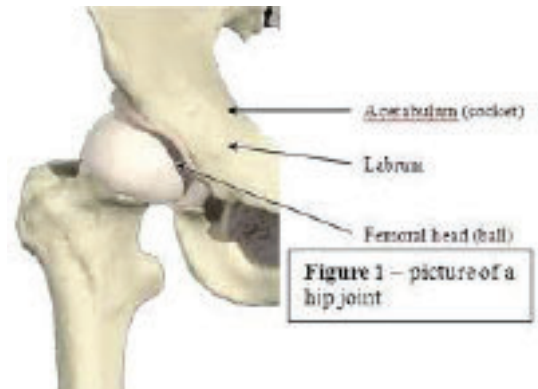
What exactly is my “hip joint”?

The hip is a ball-and-socket joint. The socket is formed by the acetabulum, which is part of the large pelvis bone. The ball is the femoral head, which is the upper end of the femur (thigh bone).

A slippery smooth tissue called articular cartilage covers the surface of the ball and the socket. It creates a smooth, frictionless surface that helps the bones glide easily across each other, much like two ice cubes would slide across each other.

The acetabulum is ringed by strong fibrocartilage called the labrum. The labrum forms a gasket around the socket.

The joint is surrounded by bands of tissue called ligaments. They form a capsule that holds the joint together. The undersurface of the capsule is lined by a thin membrane called the synovium. It produces synovial fluid that lubricates the hip joint.



When is Hip Arthroscopy recommended?

Some patients may benefit from hip arthroscopy if they suffer from a painful condition that does not respond to nonsurgical treatment options. Nonsurgical treatment frequently includes relative rest, a supervised and focused physical therapy program, or a short course of oral nonsteroidal anti-inflammatory medication that can reduce inflammation. Your surgeon may also recommend an intraarticular injection of cortisone (another type of anti-inflammatory medication) or local anesthetic into the hip joint in certain cases. Inflammation is one of your body's normal reactions to injury. In an injured or diseased hip joint, inflammation can cause swelling, pain, and stiffness.

Hip arthroscopy can relieve the painful symptoms that may be caused by damage the labrum, articular cartilage, or other soft tissues surrounding the joint. Although this damage can result from a specific injury, many other non-traumatic orthopedic conditions can lead to these problems, such as Femoroacetabular Impingement (FAI, or “impingement”), loose bodies inside the joint, dysplasia (abnormally shallow hip socket), snapping hip syndromes, and even an infection inside the hip joint.

Continued on page 9

SPONSOR SPOTLIGHT

How will my doctor know if Hip Arthroscopy is right for me?

After a thorough history and physical exam, your doctor may order imaging studies such as an x-ray, CT scan, or MRI. Your surgeon may obtain x-rays of your hip, back, or pelvis to help make a diagnosis. These are most commonly done at the time of your initial visit. Specific and properly done x-rays can many times aid in making a correct diagnosis. Frequently, your doctor may also order a CT scan or MRI to provide additional and detailed images of your hip to further delineate your treatment options.

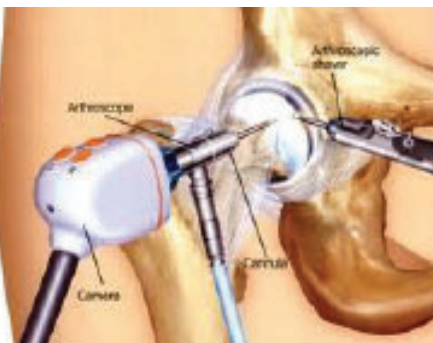
A CT scan provides a three-dimensional view of the bony anatomy of your hip joint. An MRI can show the soft tissue, cartilage, and musculature about the hip joint. Your surgeon may order a special type of MRI, called an arthrogram, where a small amount of contrast is injected into the joint to more clearly see the labrum and cartilage inside the hip joint. It is typically after reviewing all of this information that your surgeon will discuss what treatment plan is right for you.

How is Hip Arthroscopy performed?

In patients who are generally healthy, your hip arthroscopy will most likely be performed as an outpatient. This means you will not need to stay overnight at the hospital.

Before the operation, you will also be evaluated by a member of the anesthesia team. Hip arthroscopy is routinely performed under general anesthesia, where you go to sleep for the operation. Less commonly, regional anesthesia, such as spinal or epidural, can be used. With regional anesthesia, you are awake but your body is numb from the waist down. Your orthopedic surgeon and your anesthesiologist will talk to you about which method is best for you.

Hip arthroscopy is performed under sterile conditions in an operating room. Your surgeon will use fluoroscopy (real time x-ray) and instruments specifically designed for hip arthroscopy to perform the procedure. Actual surgical time ranges from 30 minutes to two hours, depending on the underlying hip pathology, tissue quality, and severity of damage.



After surgery, you will stay in the recovery room for 1 to 2 hours before being discharged home. You will need someone to drive you home and stay with you at least the first night. You can also expect to be on crutches, or a walker, for some period of time. This is typically determined by the specific procedure that you have performed.

What is the rehabilitation like after Hip Arthroscopy?

Based on the specific surgical procedure performed, your surgeon and physical therapist will devise a program that is specific for you. In some cases, crutches are necessary, but only until any limping has stopped. If you required a more extensive procedure, however, you may need crutches for 1 to 2 months. In many cases, your surgeon will use a continuous passive motion machine (CPM machine) to start gentle motion while at home early on in your postoperative care.

In most cases, formal and supervised physical therapy program is necessary to achieve the best recovery. Specific exercises to restore your strength and mobility are implemented when appropriate. Your therapist can also guide you with additional do's and don'ts during your rehabilitation. It is crucial to the success of the procedure that you follow your rehabilitation program and restrictions implemented by your surgeon and physical therapist. Recovery depends not only on the surgery but also your general state of health and commitment to the rehabilitation process.

What are the long-term outcomes with hip arthroscopy?

In many situations, patients return to full, unrestricted activities after arthroscopy. Your recovery will depend on the exact type of damage that was present in your hip.

For some people, lifestyle changes are necessary to protect the joint. An example might be changing from high impact exercise (such as running) to lower impact activities (such as swimming or cycling). These are decisions you will make with the guidance of your surgeon.

In less common circumstances, the damage may be severe enough that it cannot be completely reversed arthroscopically. In these cases, the benefit of arthroscopy may be short lived, or only partly help your discomfort.

The information provided herein is not intended to be a substitute for professional medical advice. You should not use this information to diagnose or treat a health problem or disease without consulting a licensed physician.

Spine Anatomy & Physiology

A COMPREHENSIVE REVIEW AND HANDS-ON CADAVER LAB
CME COURSE

14 November 2023
Tuesday

6:30 - 8:30 PM



presented by

BRIAN J. McHUGH, MD

Board-Certified Neurosurgeon

**Fusion Solutions
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Objective:

**Discuss the anatomy and physiology of the spine and
review various treatment options available.**



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Dr. Morgan Chen



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Brain Tumors



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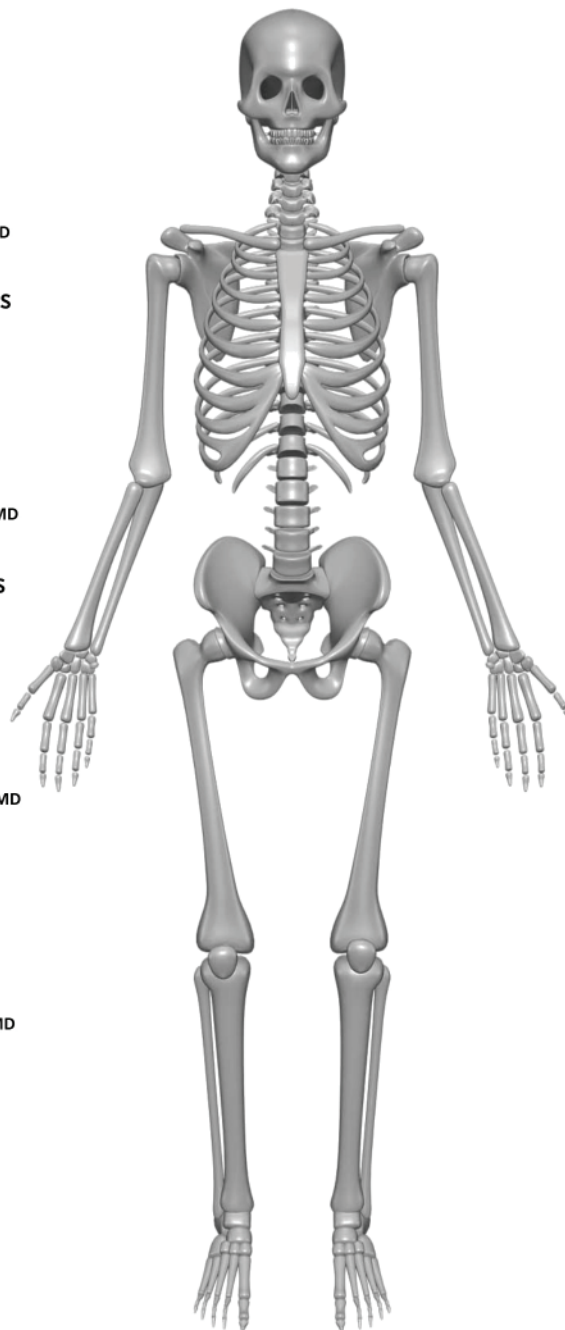
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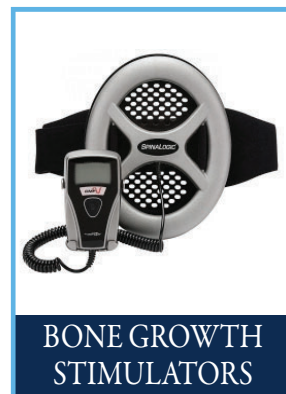
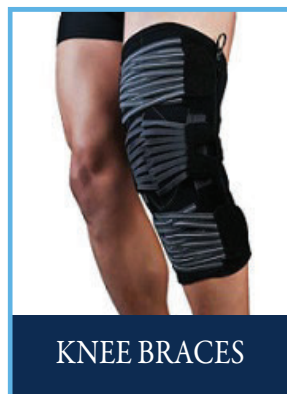
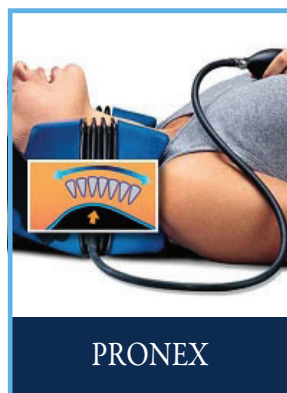
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