THE AMERICAN COLLEGE OF CHIROPRACTIC CONSULTANTS
and
THE COLLEGE ON FORENSIC SCIENCES*

Present for Re-certification **
2010 Annual Fall Conference

Knowledge and Skill Building for the Chiropractic Expert

October 7, 8, 9, 2010

Oak Brook Hills Marriott Resort
3500 Midwest Rd., Oak Brook, IL  60523
Phone: 630-850-5555

Thursday Evening  October 7, 2010 – For Early Arrivals

6:30 to 9:00 p.m.  Informed Consent and Adverse Event Potentials:  Identifying Thresholds for Informing Risk and Obtaining Consent
Warren Jahn, DC, MPS, DABCO, DABFP, DABCC
This will include a review of recent expert testimony before the Connecticut State Board of Chiropractic Examiners about the association of stroke and manipulation, and implications for informed consent generally and specific to this controversial issue.  This presentation will be augmented by a panel discussion that will address the application of informed consent in specific situations and in instances where a rules governing informed consent have not been adopted. Panelists include:  William Tellin, DC, Leanne Cupon, DC, DABFP, DACRB, DABCC and S. Steven Baker, DC, DABCO, DABFP, DABCC

Friday, October 8, 2010   Main conference Begins

7:00 – 8:00 a.m.  Registration and Full Breakfast Buffet Provided to Conference Attendees

8:00 – 10:00 a.m.  The Biopsychosocial Model of Whiplash:  Putting it Into Practice
Presenter:  Robert Ferrari, MD, MSc, FRCPC, FACP
Description:  While the biopsychosocial model of whiplash and other chronic pain syndromes is often discussed in the literature, it is not immediately clear how the health care practitioner, the patient, the insurance industry, and governments can implement that model into practice.  During this presentation, a model will be presented, the evidence for that model will be reviewed, and the practical application of aspects of the model for the various stakeholders will be described.

10:00 – 12:00  Innovations in Effective Management of Comorbid Physical and Behavioral Health Concerns: Implications of the Biopsychosocial Model
Presenter:  Pamela Warren, PhD
Description:  While there are clear-cut evidence guidelines for physical injuries and illnesses, this hasn’t been true for mental health conditions, until recently.  These types of conditions are not frequently assessed during the treatment for physical concerns.  Yet, mental health concerns commonly occur in tandem with physical issues.  In addition, psychosocial concerns such as fear of re-injury and catastrophizing, are additional factors to consider with comorbid concerns. However, frequently psychosocial issues are confused with legitimate mental health conditions leading to poor treatment outcomes.  Thus, this unnecessarily complicates the treatment process while dramatically increasing costs.  Dr. Warren will delve into how the entire biopsychosocial spectrum can be appropriately identified and addressed within the treatment and management processes to enhance outcomes for all parties involved.

12:00 – 1:00 p.m.  Lunch Provided to Conference Attendees
Friday, October 8, 2010  (Continued)

1:00 – 2:00 p.m.  Effectiveness of Manual Therapies: the UK Evidence Report
Presenter:  Gert Bronfort, D.C., PhD
Description:  This report provides a succinct but comprehensive summary of the scientific evidence regarding the effectiveness of manual treatment for the management of a variety of musculoskeletal and non-musculoskeletal conditions. The impetus for this report stems from the media debate in the United Kingdom (UK) surrounding the scope of chiropractic care and claims regarding its effectiveness particularly for non-musculoskeletal conditions. This presentation will describe how clinicians can use the conclusions and information to improve the care provided to their patients.

2:00 – 3:30 p.m.  Guidelines for Assessing Clinical Evidence in Medical Policy Development
Presenter:  Thomas Kosloff, D.C.
Description:  Utilization management policies should be developed using transparent processes including descriptions of the methods employed to identify evidence, critically appraise research evidence, incorporate pragmatic judgments, and rate the evidence. Evidence ratings should be translated into analogous terminology, which is consistent with member benefit documents. The basis for policy statements should be explicitly derived from information recorded in the Background section of the policy document. This presentation will describe a process for medical policy development consistent with these concepts.

3:30 – 4:45 p.m.  The Effect of Bias and Belief on Clinical Reasoning
Presenter:  Stephen M. Perle, DC, MS
Description:  This presentation will illustrate how bias and preconceived beliefs affect the way physicians make clinical decisions. Understanding the ways that faulty thinking prevents the acceptance of new best practice knowledge may assist clinicians in preventing one from becoming a victim of this type of thinking.

4:45 – 6:00 p.m.  Hypermobility of the cranio-cervical junction:  A medico-legal dilemma
Presenter:  Michael Schneider, DC, PhD
Description:  Dr. Schneider will present a review of the anatomy of the cranio-cervical junction (CCJ), with an emphasis on the ligaments and muscles that control the movements between atlas and axis. There is an emerging - and conflicting - body of evidence that suggests injury to these soft tissues may be related to the chronic symptoms reported by a subset of patients with whiplash associated disorders. Dr. Schneider will discuss the physical examination and diagnostic imaging procedures that are currently used to assess the integrity of the transverse and alar ligaments; including orthopedic tests, stress x-rays, fluoroscopic motion x-rays, and MRI. He will present an actual case report that highlights many of the clinical issues related to making a diagnosis of CCJ hypermobility, and the important distinctions between the terms hypermobility and instability. Discussion will follow about medico-legal ramifications of the controversial diagnosis of CCJ hypermobility.

6:30 – 8:00 p.m.  Social Hour with Appetizers

Saturday October 9, 2010

7:00 – 8:00 a.m.  Full Breakfast Buffet Provided for Conference Attendees

8:00 – 9:30 a.m.  Predicting Provider Utilization Behavior by Combining Claims Data with Publically Available Regulatory Data
Presenter:  Tino Villani, DC
Description:  Variation in provider utilization of services is commonly seen as a regional and professional characteristic associated with medically unnecessary, as well as potentially abusive or fraudulent care. Utilization characteristics such as treatment frequency, intensity, level and duration may vary widely from provider to provider within defined communities and represent a range of provider behaviors on a continuum that ranges from “best practice” to “fraud.” Categorizing and predicting such behavior may have value in a wide range of health care delivery environments for
programming and policymaking to improve patient safety, quality of care, and reducing medical expense.

A data set consisting of paid medical claims covering 2 million commercially-insured members in different regions of the United States over a recent 5-year period (2004-2008) will be used to identify practice patterns of more than 2,000 chiropractors treating over 200,000 patients. Public regulatory data, derived from the Federation of Chiropractic Licensing Board’s CIN-BAD data will be used to identify educational, demographic, and disciplinary information most likely to predict the use of medically unnecessary and/or excessive care. Other information such as patient diagnoses, provider practice patterns, and total patient cost of care will also be considered. Aggregate provider summaries will be presented, as well as a demonstration of physician variation related to each predictive metric.

9:30 – 12:00 p.m. **Coding and Compliance: Audit Methodologies to Ensure Accurate and Defensible Results**
Presenter: *Michael Miscoe, JD*, CPC, CASCC, CUC, CHCC, CRA
**Description:** Proper coding may require analysis of statutes, regulations or carrier policies and as a result, the proper code result may vary from one payer to another. As such, rather than attempt to provide the instructions for each, this course is designed to educate the attendees on how to find, interpret and apply the guidance available in each and in circumstances where such guidance is not provided, how to evaluate the quality and applicability of persuasive guidance. The goals of this program are to:
- Outline the OIG audit process
- Identify all rules/laws and standards that impact audit analysis of coding and coverage decisions
- Differentiate between binding rules and persuasive standards in order to determine what will stand up to legal scrutiny
- Predict when coding or reimbursement standards may be open to interpretation and how to resolve ambiguity
- Understand that there is no “simple coding answer”

12:00 – 1:00 p.m. **Lunch Provided to Conference Attendees**

1:00 – 2:15 p.m. **Nomenclature and Classification of Lumbar Disc Pathology**
Presenter: *John Aikenhead, DC, DACBR*
**Description:** This presentation will provide a review of findings on this topic from the Combined Task Forces of the North American Spine Society, American Society of Spine Radiology, and American Society of Neuroradiology. Standardization of nomenclature regarding disc pathology is essential in these times where limited windows of diagnosis and treatment of low back conditions exist. The problems of miscommunication are magnified when patients are treated in an interdisciplinary environment without consensus of the patient’s diagnosis from reliable and reproducible descriptions for the type of injury as well as anatomic involvement.

2:15 – 3:00 p.m. **Improving Documentation and Report Writing Through Advanced Word Processing and Modern Voice Recognition Technology**
Presenter: *Judy Richard*
**Description:** This presentation will provide a method for producing complete and encounter specific documentation quickly and accurately. Ms. Richard will show you how to create your own templates in Microsoft Word, as well as using Dragon Medical to assist efficient note or report dictation. While the focus will be on the needs of the doctor of chiropractic, this information is relevant for all healthcare practitioners. Ms. Richard will be available throughout the weekend to answer specific questions about EMR, voice recognition and related computer issues.

Presenter: *Jeffrey R. Cates, DC, MS, DABCO, DABCC, DABMC*
**Description:** This presentation will summarize the work of the CCGPP including regional systematic literature reviews that support individual CCGPP guideline recommendations. The CCGPP is entering the DIER phase of guideline production. DIER refers to the process of dissemination, implementation, evaluation, and revision of the guideline work. The DIER process provides an ongoing quality control loop that should allow the CCGPP to continually improve and update chiropractic guidelines; and a plan to effectively disseminate and implement those guidelines in an effective manner.
8 hours of continuing education for the Thursday morning/afternoon program***, 2.5 hours for the Thursday evening session, and 16 hours for the main conference program on Friday and Saturday applied for in all states except OK. Total available hours for all three days 26.5.

* The Council on Forensic Sciences is a recognized Council of the American Chiropractic Association

** Thursday evening, and Friday and Saturday program qualifies for 18.5 hours toward ABCC, and 17 hours toward ABFP diplomate re-certification hours.

*** See separate flyer for details of an additional 8 hour program on Thursday morning and afternoon October 7 that is available free to doctors registered for the main conference. This program focus is rehabilitation, and is co-sponsored by NCMIC Insurance Company. Attendees for this portion of the seminar, and who are NCMIC policy holders are eligible for 5% professional liability insurance premium discount.

Conference Speakers:
Robert Ferrari, MD, MSc, FRCPC, FACP
Pamela Warren, PhD
Gert Bronfort, DC, PhD
Thomas Kosloff, DC
Stephen Perle, DC, MS
Tino Villani, DC
Judy Richard
Michael Miscoe, JD, CPC, CASCC, CUC, CHCC, CRA
Michael Schneider, DC, PhD
John Aikenhead, DC, DACBR
Warren Jahn, DC, MPS, DABCO, DABFP, DABCC
Jeffrey R. Cates, DC, MS, DABCO, DABCC, DABMC