

STELLAR GOOD NEWS

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Stellar Software

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Stellar Updates

Recent changes and updates to Stellar:

Configuration

Added "One Month-of-Service per Claim" option.

Electronic Claims

Changed to use 1C qualifier and appropriate group number for RR Medicare.

ANSI claims now include subscriber DOB regardless of relationship. Resubmit occasional looping problem fixed.

Kansas: referring UPIN no longer included if NPI provided, and fixed problem with REF G5.

Georgia: stopped automatically putting tax ID in ANSI field GS02.

Michigan: Improved payer look-up in Michigan payer list. Fixed duplication of EI REF segment for commercial claims.

NSF claims now properly include rendering provider ID.

Paper Claims

Allow canceling the submission if patient is in use by another user.

Purged extra spaces from box 32 line 3, so 9-digit zipcodes will print.

Made boxes 9 and 9a blank for secondary Medicare to Empire Medicare.

Georgia: Added Signature Date to box 12 to avoid Medicare rejection.

Carriers

Added Group NPI column to carrier PIN Numbers tab. This can be used to override the clinic NPI in rare cases where a particular carrier (usually Medicare) wants

a different group NPI in box 33a. Both paper and electronic claims will honor this.

Narrative

Allow user to enter text into Carrier/Lawyer boxes to replace the patient insurance carrier which appears there. This allows writing to referring Dr.

Healing Light

Pocket size, full spectrum pulsed LED, plus red, blue, violet, orange, yellow, green, white, infra-red. Seven settings: Red side of spectrum, blue side, complete spectrum, with/without infra-red, full set of Nogier frequencies, choice of Nogier frequency. Regular 9v or rechargeable with separate charger. If you would like to be in on the initial prototype production, call 580-323-7090. Introductory price of \$1000 will never be available again. Training available.

References:

<http://tinyurl.com/2gubgg>

<http://heelspurs.com/led.html>

<http://www.nirtherapy.com/>

Would You Like?

Would you like to see a Missed Appointment follow-up feature in Stellar? If so, please call, fax, or e-mail us with your thoughts. What has been proposed so far is a reminder report enabling calls to the patient. These are the features:

- 1) Listing the patients who need follow-up now.
- 2) Reason patient gave for miss.

3) Action to take, and any other information gleaned from the call.

Medicare opt-out?

Dear DC's, did you know that you are the only health care providers who are prevented, by law, from opting out of Medicare? The links below document this. You can become non-participating, but the rules on filing claims and documentation still apply to you! After reading why the MD from Greenville opted out, and the "legal mine field" article, you will understand that MOST chiropractors (and MDs) can be penalized or jailed right now. If you are getting paid by Medicare for maintenance care, you are illegal. See "CMS lays it on the line" below. The OIG says that 80% of the problems with Medicare can be blamed on Chiropractors and 40% of the complaints are for DCs (complaints *from* MDs?). Chiropractic gets 1/10 of 1% of health care revenue, so who is he kidding? WHAT IS WRONG WITH THIS? Are the ACA and ICA organizing the profession to deal with this? Who is providing answers? Do you have an alternate plan for survival?

Everybody can opt out of Medicare - EXCEPT Chiropractors - see these links:

<http://tinyurl.com/37aauf>

<http://tinyurl.com/2tnsur>

An MD who opted out of Medicare describes what has gone wrong with the doctor/patient relationship:

<http://tinyurl.com/yp3tf2>

CMS lays it on the line - MUST READ:

<http://tinyurl.com/39m234>

As a health care provider, you walk through a legal mine field:

<http://tinyurl.com/33ourk>

Does it feel like you have a bulls-eye painted on your back? That is because you do! As a profession, D.C.s are slated for extinction unless they wake up and join forces to take positive action. Their persecutors must be held accountable where it hurts, in Federal Court. How can I say this? Look at the NDs, they lost one federal case and they lost their schools and hospitals and many lost their licenses. It has taken them 60 years to get back on their feet.

QuackWatch Update

The American Journal of Clinical Chiropractic, in their October 2007 issue, contains an update to the 'Don Harrison v Steven Barrett and Quackwatch' lawsuit, and announces the preparation of a class action lawsuit. I have men-

tioned Steven Barrett and his AMA funding in previous newsletters. It is apparant that there is a conspiracy (can you say RICO?) to remove competitors to allopathic medicine. Just how far this goes depends on you, dear DCs, and your willingness to get involved in the fight for your profession. You can read this article at <http://tinyurl.com/yp638w>

Many insurance companies will not reimburse doctors or patients for the use of certain chiropractic techniques. To make matters worse, the insurance and patient network companies say that if you use any of these procedures, you are violating the Scope of Practice of Chiropractic and you will not be allowed to participate in their company's network of chiropractic practitioners. It is also a fact that in some cases these companies will report practitioners using these "experimental" techniques to the chiropractor's state boards for possible disciplinary action. In many instances, the types of procedures called experimental by the insurance companies and the reasons given for characterizing them as experimental track directly or are explicitly drawn from articles published on the Quackwatch website. You can see the importance of these legal actions. DCs got included in Medicare's definition of 'provider', it is time to get equal treatment under the law also! <http://tinyurl.com/yp638w>

Medicare Records

U.S. Government Regulation 12100.10

(Unrestricted Reopening)

All States have a Statute of Limitation in regards to the length of time you must keep your patient's records . In most States, the time factor is five (5) or seven (7) years, and then the State says you can destroy those records according to HIPAA guidelines.

This regulation governing "Reopening and Revision of Claims Determinations and Decisions" *takes precedence* (it is a federal program) over State statute. This is a reminder to providers in the Medicare program, that Medicare Carriers may pursue claim refunds "at any time" under specific circumstances.

Thus, you are responsible for Medicare Patient records throughout your total practicing years into your estate settlement. You must NEVER destroy Medicare Patient records. Remember, you carry the responsibility of your Medicare Patient records indefinitely. That is called unrestricted reopening of any and all of your Medicare patient files and records, including x-rays.