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SecureCare National eNewsletter | Summer 2017



Looking Toward the Future

By **Louis M. Andersen**
SecureCare CEO

SecureCare recently announced it had been selected by Aetna to manage their network in several East Coast states. Providers in the service areas were notified directly by Aetna of the new arrangement, and SecureCare began actively working on communication and implementation plans. The new arrangement with Aetna included a significant increase in reimbursement rates for our providers.



Louis M. Andersen
SecureCare CEO

Shortly after the announcement to providers, SecureCare was notified by Aetna that a conflicting corporate level project necessitated that the local arrangement between SecureCare and Aetna be cancelled. This came as quite a shock to SecureCare, the chiropractic state associations and the providers.

Despite months of hard work, negotiation, and being selected as the best network manager, we lost the local deal due to larger corporate projects. This situation provides a valuable learning moment for all involved with SecureCare. We have learned how complex these projects can be. We have learned that indeed SecureCare's vision and value proposition is attractive to large companies. The data and analysis SecureCare performed was validated by several different departments at Aetna and found to be accurate. Local Aetna executives were excited to work with SecureCare and forge a better relationship with the profession. All of these facts validate the vision and mission of SecureCare is correct and valued.

This also demonstrates how complex and difficult effecting change is within the current health care environment. Today's insurance companies are so large and complex, that often leaders within a single company are not all on the same page. This does not reflect bad faith on the part of Aetna or any other company, but it does illustrate the enormous complexity of landing a deal.

Despite the disappointment of losing the Aetna deal, we have also learned that we must all continue to work toward our shared goal - creating win/win business outcomes for both doctors and insurance companies. SecureCare and Aetna continue to have a productive ongoing business relationship.

Thank you for your continued support.

Quarterly Data Assessment

SecureCare is considered a First Tier Entity according to the Centers for Medicare and Medicaid Services (CMS). As a First Tier Entity, we must comply with the CMS requirements that mandate the health plan "maintain and monitor a network of appropriate providers that is sufficient to provide adequate access to covered services to meet the needs of the population served" in accordance with CMS regulations Section 422.112 (a) (1).



SecureCare, Inc., must assure the provision of accurate participating provider information/data in a consistent and acceptable format to our health plan clients. **SecureCare will be contacting you by email shortly as a "network/contracted provider" to verify the accuracy of your 'accessibility' information and 'demographic' information, as listed below:**

- Ability to accept new patients

- Address
- Phone number
- Any other change that affects availability to patients

Because SecureCare is required to notify our contracted clients within five calendar days of becoming aware of any changes to the pertinent provider directory information, we request that you contact the SecureCare Provider Services Department immediately at providerservices@securecarecorp.com or 877-462-4476 if there are **any changes** related to your Provider Directory information.

CMS regulations mandate a quarterly assessment of Provider Directory information and data. Therefore, subsequent SecureCare inquiries regarding your practice information and data will be forwarded to your office at the end of each quarter. You will soon receive the form requesting you to review your practice information and advise the SecureCare Provider Services Department of any changes or updates to your information.

Evidence-based Guidelines That Are Practical

By Mark A. Knoll, DC
Medical Director



Mark A. Knoll, DC.
Medical Director

Busy clinicians can fail to make time to keep up with the latest research that affects the chiropractic profession. A provider's rationale could be that it doesn't seem that published articles are able to be practically applied to clinical practice. Today, I am directing you to an article that I believe can be practically applied. I would challenge you to begin using this tool in your daily practice.

David Sackett, M.D. is widely regarded as the father of evidence-based medicine. Contrary to what some people believe, evidence-based medicine includes three facets:

- Research-based evidence
- Clinical expertise
- Patients values and preferences

In a nutshell, this means that clinicians should combine the latest published evidence along with their clinical experience and patient input when determining how to treat their patients.

The Council on Chiropractic Guidelines and Practice Parameters (CCGPP) is an organization that has created a number of evidence-based resources for your use. These include clinical guidelines, educational opportunities, research, and much more. Today I will be focusing on their paper, "[Algorithms for the chiropractic management of acute and chronic spine-related pain](#)". To utilize CCGPP's resources or to find out more about this organization, please visit their website at clinicalcompass.org

When a provider chooses treatment modalities and a treatment plan for a patient's condition, it should be done with that individual patient in mind, not simply a cookie cutter approach used for all patients. This ensures that the patient is treated based on their needs. I am thankful that my early training in the chiropractic profession was based on this approach: treat each patient based on their needs and then release them

from care when clinically appropriate. The provider needs to be careful not to use their chiropractic philosophy as justification when determining care plans for third party payor patients. We have entered the days where efficient providers will be rewarded and non-efficient providers will be penalized. This is the value-based managed care model. If a provider can't fit into this model, then being part of the managed care networks may not be a good fit for them.

SecureCare's methodology of utilization management relies on the fact that providers will treat patients as individuals and not treat all patients alike, regardless of their presenting condition. As medical director for SecureCare, I have had the opportunity to review many doctors' clinical records. One issue that I frequently see during my record analysis is that many doctors who fall outside our utilization parameters have developed specific protocols and treatment plans in their offices regardless of the condition that they are treating. My goal as a medical director and the goal of third party payers is to see that patients are treated based on clinical need. When all patients are treated identically regardless of their condition, this is not treating them according to their clinical need.

New patients or patients with a new episode require a thorough history and examination to determine if red flag conditions exist. If so, these patients need to be referred immediately to the appropriate provider. If no red flag conditions exist, then a proper history, examination and imaging, if appropriate, should be able to identify the cause of the presenting condition and any complicating factors so that the appropriate treatment and schedule of care can be prescribed.

The use of the attached algorithm can assist a doctor with developing appropriate care plans and in determining appropriate treatment. A care plan should never extend beyond a 4-6-week period without an examination to objectively measure progress. However, if a patient responds more quickly, the patient's condition should be evaluated and the care plan adjusted based on their need. Conversely, if a patient has certain complicating factors, this is seen as rationale for additional care. This complicating information needs to become part of the medical record.

Third party payers do not pay for maintenance care, so it is important to release patients to a personal pay plan when they have reached a point of stabilization with their condition. In addition, when patients are not responding to the prescribed treatment, the patient needs to be re-evaluated and either a different treatment approach needs to be implemented or the patient needs to be referred to a different healthcare provider.

The use of an evidence-based guideline is a way of developing a standard within our profession. Unfortunately, patients who currently see different chiropractic providers for similar conditions may receive widely varying treatments and care plans. All professions need some level of standardization, and in my opinion, this is an excellent start to this process.

Blue Cross Blue Shield Association Summit May 2017

By Ann Bruns
Director of Business Development

The 2017 National Summit in Orlando, Florida, is the premier BCBSA conference of the year, assembling professionals from across the BCBS system to share best practices and ideas for growth, gather insights from keynote addresses and breakout sessions.



Ann Bruns, *Director of Business Development*

This year's theme was "Navigating Change," and among these changes are: distribution channels and care delivery models; an increasing reliance on data; an accelerated trend toward consumerism; a shifting regulatory environment and ever greater demands from employers.

It is easy to determine why SecureCare decided to participate as a vendor in this well-attended event. It was an opportunity to meet with influencers and decision makers from virtually every business discipline across the BCBS System, but did you know...

- BCBS spans every zip code in the US
- BCBS is the most preferred healthcare brand
- BCBS has 105+ million members
- BCBS collectively spends more than \$15 billion on goods and services each year

SecureCare was honored to have been selected by the BCBSA Summit 2017 committee to exhibit. In addition, SecureCare sponsored the Wednesday evening reception. This year over 1,300 Blue Cross Blue Shield company attendees had an excellent opportunity to learn more about what services SecureCare has to offer their individual plan.



The SecureCare exhibit booth was represented by: Lou Andersen, CEO; Ann Bruns; Dr. Eric Osterberg; Kim Driggers Esq.; and Sue McHargue (BCBS Nebraska retiree living in FL). We are excited about the new relationships we've formed with many key decision makers from across the country including Puerto Rico!



Overall, SecureCare had the distinct opportunity to have meaningful conversations with engaged decision makers with an organization we consider a trusted partner.

The Patient-Centered Medical Home: A Natural Fit for SecureCare & Chiropractic

By Eric Osterberg, DC

Director of Business Development, SecureCare East Coast

Chiropractors often find that developing collaborative working relationships with Primary Care Providers (PCPs) is a win-win relationship. Patients win with safe, effective and affordable chiropractic care. PCPs win with effective new treatment options for their challenging neuromuskuloskeletal patients, and DCs win with access to patients through new referral sources.



Eric Osterberg, DC.
*Director of Business
Development,
SecureCare East
Coast*

Fortunately, primary care models are changing and making it even easier for the chiropractic profession to collaborate with PCPs. In the old primary care model, PCPs were positioned as "gatekeepers". They controlled patient access to other specialists and granted permission by a system of referrals. Often the system placed financial risk directly on the PCP resulting in a situation where the "gatekeeper" was financially rewarded for allowing less care.

Over the last 15 years, the growing trend has been the Patient Centered Medical Home (PCMH). The PCMH is a team-based care delivery model that is led by a PCP. The model is designed to provide better communication, better patient education, better access to primary care and specialists, increased patient satisfaction and improved health outcomes. The PCMH model is also intended to save costs by providing more comprehensive routine and preventive care while avoiding costly "crisis care" like emergency room visits and hospitalizations. The PCMH model focuses on quality care and cost-effective outcomes.

In the PCMH the patient has open access to see whatever provider they choose. No referral or permission is required. The PCP that they choose provides patient information to the other specialists and helps coordinate care with the other providers of the health care delivery team.

There is no doubt that the PCMH model is growing across the country. The Patient-Centered Primary Care Collaborative currently lists 504 PCMHs on their website. (<https://www.pcpcc.org/initiatives/list>) There is also no doubt that the published research over the last 15 years has consistently demonstrated chiropractic care to be a safe, effective and cost-effective choice for those suffering with the most common neuromuskuloskeletal ailments. The chiropractic profession is perfectly positioned to collaborate with PCMHs to help them achieve results and SecureCare is positioned to organize the chiropractic profession into statewide provider networks and to communicate the value proposition of the profession to the decision makers for inclusion in the PCMH team of health care providers.

While SecureCare is making great strides by connecting with large health plans, we are currently establishing relationships with small regional health plans, self insured employer groups, PPOs, ACOs and offering solutions to the new and developing market of PCMHs too.

The Better Way to Get Back Pain Relief

Growing research suggests that drugs and surgery may not be

the answer for treating a bad back. The American College of Physicians, which represents primary care doctors, the providers people consult most often for a backache issued new guidelines for back pain treatment, saying that the first line of defense should be non-drug measures.



Click below to read the full Consumer Reports article.

[Read More](#)

Cross-Sectional Analysis of Per Capita Supply of Doctors of Chiropractic and Opioid Use in Younger Medicare Beneficiaries

Have you ever thought that a higher supply of doctors of chiropractic could lower opioid use? Click on the link below to read some research that is beginning to prove that this is the case.



[Read More](#)

SecureCare New Hires



Margie Metcalf



Jolynn Grashorn



Susan Bailey

Since March, SecureCare has added three new staff members to the Provider Services team.

Margie Metcalf, a Credentialing Specialist, has an extensive history in the health care industry working in different positions such as Life Underwriting Services, Group Premium, Provider Relations/Credentialing and Compliance/HEDIS. During her career, she has worked for Aetna, Coventry and Mutual of Omaha.

Jolynn Grashorn, our Account Executive for BCBS Minnesota, has spent her career working for home medical equipment companies training both nurses and patients in the field of respiratory therapy. Most recently, Jolynn spent five years as an office manager for a multi-doctor chiropractic clinic in Omaha.

Finally, Susan Bailey, a Credentialing Specialist, comes to us with over 30 years of experience working for Mutual of Omaha, Coventry and Aetna. Her background includes a comprehensive knowledge of commercial claims and provider relations.

When asked what they like best about SecureCare so far, all three responded the tight, close-knit family atmosphere. Help us welcome Margie, Jolynn and Susan to the SecureCare family!

We've Gone Social!

Be sure to "like" and "follow" SecureCare on [Facebook](#), [Twitter](#) and [LinkedIn](#). Social media allows us to connect and communicate with SecureCare members and potential members, while continuing to uphold the SecureCare brand. Share your news, updates and successes with us, and we will continue to keep you updated on the latest information nationwide.



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SecureCare | 13215 Birch Drive, Suite 200 | Omaha, NE 68164

www.SecureCareCorp.com

Office: (402) 934-4744 Toll-free: 1 (877) 462-4476 Fax: (402) 934-4908

*SecureCare is a subsidiary of the Nebraska Chiropractic Physicians Association
and is partnered with various state associations*

