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Work More for Less

By Ralph Stephens, BS, LMT, NCTMB

Recently, a small group in the massage profession (less than 20% according to one questionnaire) has tried to promote the concept that we should rapidly do everything necessary to become accepted as providers by third-party payers.

Third-party payers are also known as either some form of insurance company or the government. Understand that neither of these organizations have any interest in providing benefits to consumers. Their interest is to take as much from consumers as possible and give as little as possible back. Think about this and remember it always.

There are many types of insurance. The most sinister is health or medical insurance, which will be more accurately referred to in this article as "sickness insurance." It is a part of the sickness industry that manages sickness and makes no significant income from healthy individuals. Sickness insurance is the banker (arguably the extortionist) for the allopathic medical system that treats symptoms, primarily with drugs and surgery: in other words, MDs, HMOs and hospitals. The sickness industry and its banker have no inherent desire for there to be healthy people, because it makes little money from them. They control people's sickness (managed care). They hate competition. They have sworn to eliminate all competing forms of health care. (That's us!) If they cannot eliminate the competition, they will attempt to suppress or control them. (That's us!) Do not fall for the reasonable sounding argument that sickness insurance wants to pay less claims and healthy people file less claims, therefore insurance wants healthy people.

The sickness insurance system was created by the medical industry to collect as much money as it can from as many people as possible, and funnel that money to the sickness industry. The insurance company gets to invest the premiums paid, to make as much money as possible for its owners or shareholders on the money while it holds it. When it doesn't have enough money to meet the appetite of the sickness industry and

reward its owners, it raises premiums. Then the sickness industry raises its rates, which causes premiums to go up even more. Does this pattern sound familiar?

Other types of insurance in the health care arena, like workman's compensation and other personal injury or liability insurance, are somewhat different and are not part of the focus of this discussion.

It is quite amusing that many other health care professionals are trying to get out of the sickness insurance system and get back to working for the patient for fair and reasonable rates. Providers with other licenses (nurses, physical therapists, etc.) are changing professions and becoming massage therapists to get away from the control of insurance and Medicare/Medicaid restrictions. They are getting out of the sickness system so they can help more people. Why are massage therapists clamoring to get in? They want more money. They say it is to help more people, but it really is for the money. They will be very disappointed if they get their wish.

Chiropractors fought their way into the system through the legislatures and the courts. Has it brought them any better acceptance by the allopathic, medical-sickness industry? Very little, if any. DCs are ensnared in the sickness insurance system. It looked like they would make a lot of money from insurance, and initially, many did. However, now that the vast majority of DCs are dependent on third party payment and their patients addicted to it, the third parties are paying less and less. Recently, DCs are being charged fees to belong to provider networks. The numbers of visits per year or per occurrence are being limited. In California, American Specialty Health Plans (ASHP) has just "renegotiated" the fee for a chiropractic office visit. The fee has been lowered from \$38 last year to \$26 this year, a 30% decrease.¹ This will probably trigger similar reductions by other plans and possibly Medicare and workers' compensation. Want to work more and more for less and less? Want to make 30% less per year?

Do not be so idealistic as to believe that once a significant number of massage therapists are providers, networks won't treat them like they do the DCs. In fact, it has already started. Several networks are recruiting massage therapists. The contract requires the therapist to offer significant discounts to their published fees and not to charge over a specified amount. A clause in the small print says that the network can reduce the amount the therapist may charge whenever the network desires. The light at the end of the insurance tunnel appears to be a train.

The public has discovered massage. They are flocking to massage therapists and paying for services with their own money. Why interrupt this trend? Why get in the way of patients taking responsibility for their own health. The only thing that can stop the wave this profession is riding now is if its ego demands acceptance from the sickness system. That will never be accomplished. Why? Because massage is a **health** care system. We are an alternative. We are **not** complementary. Massage has the potential to become the premier wellness modality.

Health is **not** a right, it is an individual responsibility. We should support people in taking this responsibility, not help keep them in the sickness system. It is best to run away from sickness insurance and fight against government-controlled health care. Massage therapists should focus on better education and higher standards, not on appeasing or conforming to the sickness industry. We must strive to provide better health and wellness information and services to the public. We are a totally different paradigm. We are "health care"; they are "sickness care." The massage profession has emerged. It will continue to grow and blossom as long as it supports individuals taking responsibility for their own health. It will wilt and possibly die if it succumbs to the temptation of money from the sickness industry.

Reference:

1. Petersen, Donald M, Jr.; How low will you go? MCO's drool as they watch. *Dynamic Chiropractic*, September 18, 2000; p. 1 & 39; available on line at www.chiroweb.com/archives/18/20/19.html
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