



# COA Report

California Orthopaedic Association

January 22, 2021

## TOP NEWS

### Zenith Insurance

Have you had problems with Zenith Insurance handling your Workers' Compensation billings Medical-Legal and/or Treatment?

If so, COA would like to hear from you. We don't need details of specific claims, just a general statement from you as to your experience with Zenith Insurance. For example:

- I work with a medical-legal management company. Zenith refuses to pay the medical-legal management company for medical-legal evaluations that I perform even though I have authorized the payment to be sent to the medical-legal management company .....
- Zenith routinely downcodes my medical-legal evaluations from ML103 to ML102 .....
- From ML104 to ML102 .....
- I refuse to treat injured workers from Zenith because .....
- It is impossible to get authorizations for treatment in a timely manner .....
- Zenith refuses to authorize medically necessary services .....
- It is difficult to work with Zenith claims adjusters .....

Please select the statement(s) that apply to your practice and elaborate on the problems you have experienced. You can select more than one statement if applicable. Again, we do not need patient names or dates of services, etc., we just need your statement.

COA is working with a Workers' Compensation attorney who has already identified specific cases. To strengthen his case, he is now trying to show statewide problems with Zenith. Your name will be linked to your statement, but no other identifying information.

If you have experienced problems with Zenith, let us hear from you – [admin@coa.org](mailto:admin@coa.org)

## Having Trouble Getting Prior Authorization for your Services? Collecting Your Bills from Payors?

AAOS

Learn how to perfect your claims and increase reimbursement.

Watch this [AAOS webinar](#) — Claims Denials and Appeals — to hear tips from coding and billing experts.

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## COVID-19 GUIDANCE

### Why You Should Get the COVID-19 Vaccine

Point Reyes Light

Some people are concerned about taking the new vaccine. Should you get it now, wait, or take a pass? As a physician in the Bay Area, I jumped at the chance to get vaccinated out of fear of bringing the virus home to my family or infecting my patients. But others are afraid or hesitant; we tend to make personal health care decisions based on our information sources, our perceptions of risks and benefits, our mindset, and stories we hear from people we know.

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### DWC Issues Notice of Conference Call Public Hearing on February 18 for Proposed COVID-19 Evidence-Based Update to the Medical Treatment Utilization Schedule

State of California Department of Industrial Relations

The Division of Workers' Compensation (DWC) has issued a notice of conference call public hearing for a proposed evidence-based update to the Medical Treatment Utilization Schedule (MTUS), which can be found at California Code of Regulations, title 8, section 9792.24.7. The conference call public hearing is scheduled for Thursday, February 18, at 10 a.m. and members of the public may attend by calling 866-390-1828 and using access code 5497535#. Members of the public may review and comment on the proposed updates. Written comments must be submitted no later than February 18. Please see the proposed regulation page for direction for submitting written comments.

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## PRODUCT SHOWCASE



### Weight Loss and Better Outcomes

Help your patients lose weight and improve their health with a virtual and evidence based weight loss program that can be brought in house or you can refer your patients to a professional Health Coach who will work with patients remotely. Extensive on-line support for your patients and your practice.

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# PRACTICE GUIDANCE

## 15 Things To Know About Total Joint Replacements and ASCs

Becker's ASC Review

More total joint replacements are migrating to the outpatient and ASC setting following CMS payment updates and more studies showing the procedure can be performed safely in the outpatient setting. Here are 15 things to know about the procedures and ASCs.

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## Clinical Faceoff: What is the Role of Acromioplasty in the Treatment of Rotator Cuff Disease?

Clinical Orthopaedics and Related Research

The debate over the cause of rotator cuff disease and its treatment has been around since the late 19th century, with the disagreement centering around whether the pathology seen in rotator cuff tears is caused by inherent degeneration of the tendons, contact of the tendons with some structures, or both. Charles S. Neer II MD was the first to coin the term "impingement lesions," which he described as tears of the rotator cuff caused by contact of the rotator cuff with the anterior acromion and the coracoacromial ligament. For symptomatic rotator cuff disease, he recommended a partial anterior acromioplasty with release of the coracoacromial ligament. These procedures subsequently became the go-to treatment for rotator cuff disease. However, there has been continued controversy regarding the role of the acromion and coracoacromial ligament in rotator cuff disease.

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## Could an Osteoporosis Drug Reduce Need for Hip Revision Surgery?

Medscape

A single injection of denosumab (*Prolia*, Amgen), frequently used to treat osteoporosis, may reduce the need for revision surgery in patients with symptomatic osteolysis following total hip arthroplasty, a new proof-of-concept study suggests. Aseptic loosening is the result of wear-induced osteolysis caused by the prosthetic hip and is a major contributor to the need for revision surgery in many parts of the world.

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### COA Report

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[Dennis Hall](#), Director of Publishing, MultiView, 469-420-2656 | [Download media kit](#)  
[Brie Ragland](#), Content Editor, MultiView, 469-420-2604 | [Contribute news](#)

**California Orthopaedic Association**  
1246 P Street | Sacramento, CA 95814  
916-454-9884 | [Contact Us](#) | [www.coa.org](http://www.coa.org)

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