

1 **Policy:** **Public Events: Providing Diagnostic and Treatment**
 2 **Services**

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 4 **Date of Implementation:** **April 17, 2008**

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 6 **Product:** **Specialty**
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 9 Participation by contracted providers/practitioners in public events and community
 10 activities can be a benefit to the public, the practitioner, and the health care profession.
 11 Such events may be at the invitation of schools, employers, athletic teams, sponsors of
 12 sporting events, or other appropriate venues (when not in conflict with the “Advertisement
 13 of Relationship with ASH Group and Clients” section in the applicable ASH Practitioner
 14 Services Agreement or Provider Services Agreement). Unlike public screenings or health
 15 fairs, this type of participation anticipates that the health care practitioner may be
 16 performing both diagnostic and treatment services in support of the public event (e.g.,
 17 marathon treatment station, school athletic event). This type of public activity should only
 18 be performed in a professional and ethical manner and at a suitable location.

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 20 Services provided while participating in public events and community activities must meet
 21 professionally recognized standards of practice and regulatory requirements including, but
 22 not limited to those addressing:

- 23 • Privacy and confidentiality;
- 24 • Adequacy of evaluation prior to rendering an opinion/diagnosis/treatment;
- 25 • Medical Record documentation;
- 26 • Informed consent;
- 27 • Scope of practice;
- 28 • Advertising and promotional materials;
- 29 • Free or discounted treatment/services; and
- 30 • Billing practices, if appropriate.

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 32 Services may include general health assessments, biomechanical analysis, injury
 33 assessment, treatment, nutritional evaluation, or other health assessment as allowed within
 34 the practitioner’s scope of practice, appropriate to the venue, and subject to the recipient’s
 35 informed consent regarding benefits and risks. All services are to be conducted with respect
 36 to the individual’s rights to privacy and confidentiality. If such services result in providing
 37 opinion, diagnosis, and/or services specific to an individual, medical record documentation
 38 meeting local, state, and/or federal requirements is expected. All materials and services
 39 provided must be based on professionally recognized standards and clinical evidence.

1 Generally, such services are provided as a community service. If the practitioner intends to
2 charge the recipient of services or any third party payor, the recipient must be informed
3 and provide written consent prior to the provision of such services.

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5 Practitioners may not use, experimental, investigational, or unproven treatments
6 procedures, devices, or biological products including but not limited to those determined
7 by American Specialty Health – Specialty (ASH) clinical committees to be not widely
8 accepted as evidence based (see the *Techniques and Procedures Not Widely Supported As*
9 *Evidence-Based (CPG 133 – S)* policy).

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11 All practitioners must be in compliance with all applicable regulatory requirements
12 regarding diagnostic and treatment services in the state(s) in which the public event is held,
13 as well as any applicable state board requirements.