

Multidisciplinary Centers: What's in Them for Me?

What is a multidisciplinary center (MDC)? What does it do? How does it compete in today's arena? Is it legal? How many different names are used to describe the same center? Is an MDC created to circumvent limits on chiropractic benefits?

This article is designed to introduce you to how and why multidisciplinary clinics make so much news.

Definition: An MDC is made up of at least two health care professionals of different disciplines practicing in the same location.

Other Terms: integrated center; holistic; diversified; one-stop shops; complete care; complementary health care facilities; comprehensive facilities; MD/DCs; etc.

Who Are These Health Care Practitioners?

Typically, they are DCs and MDs (or DOs) cotreating patients.

How Have These MDCs Evolved?

MDCs have existed for decades, with many DCs looking into such ventures within the last 10 years. About 83 million people in the U.S. (42 percent of the adult population) used at least one alternative therapy in 1997. Usage among those aged 35-49 is even higher (50 percent).

The estimated number of visits in 1997 to providers of "unconventional therapy" (629 million) was greater than the number of visits to all primary care medical doctors nationwide (386 million).

Americans spent \$21 billion out-of-pocket on visits to alternative practitioners in 1997, an increase of 45 percent from 1990. This does not include money spent on retail items, such as herbal products (\$5.1 billion), or books, classes and equipment (\$4.7 billion). For comparison, out-of-pocket expenditures for physician visits were \$29.3 billion, and \$9.1 billion for hospitalizations.

Why did 42.1 percent of U.S. citizens surveyed use at least one of 16 alternative medicine practitioners - an increase from 427 million in 1990 to 629 million in 1997, exceeding the total visits to primary care physicians?

The previously mentioned statistics also clearly show that the interest in alternative therapy from the public has definitely increased. It is interesting to note that another reason why the integration has become so popular is for its financial rewards. As insurance companies contracted with more and more HMOs, doctors found themselves rendering the same type of service with decreased reimbursement.

Most doctors, therefore, started to look for different avenues to supplement their incomes, and consumers demanded that services be rendered expeditiously. This was aided by the advent of the internet and the cellphone.

It is interesting that there are more MDC clinics in California, Illinois, New York, Florida, and New Jersey. Other states where managed care has very little, if any effect, have negligibly tried to create these MDC centers. Indeed, my consulting firm, which is over seven years old and strictly limited to the integration of MD and DC centers nationwide, has kept extensive demographic records of the nation's MDCs. By far, New York and Florida are at the top of this list for integration.

Hence, an MDC offers in one location all of the various services possible to treat most conditions.

Starting an MDC: What Are the Requirements?

My years of experience have confirmed that the minimum requirement for an MDC practice is at least 125 office visits per week, 20-25 new patients per month, and \$25,000 or more per month in collection. A clinic should be established at least three years old, with a minimum of 800 square feet of area. A working capital of at least \$15,000 is needed for the first 90 days of inception, and the doctor needs to have a "clean" record. In fact, our office will not consider any potential doctor unless a thorough search has been done on his personal file first!

Contrary to popular belief, a thorough knowledge of coding and billing is not necessary. What is of absolute importance is a solid management team to be in place (i.e., an office manager who has worked for the practice for at least a year and understands the mechanics of the practice).

What Is to Be Done Legally?

Having created over 856 centers in 45 states, and having practiced personally in my own center nearly 10 years, I can reasonably state that only a reputable health-law firm should be used to assist and coordinate the formation of the MDC. Too many attorneys have "reviewed" such practices or claim to have "researched" these issues. The true question is: How many of these attorneys actually have represented on a state or federal level any one of these cases? Have any of these so-called "experts" been in either the defending or prosecuting sides of such entities? There are 89 very serious pending investigations relating to this. Most of these "experts" are not even aware of the existence that such cases exist.

I have been an expert witness for over 34 cases nationally. Following are questions to ask your potential attorney:

1. Is the legal firm specifically and exclusively a "health law group?"
2. How many MDC structures have they established, and how long ago were they formed?
3. Is the firm aware of the latest rules and regulations?
4. Does the firm have a minimum of 10 references of current, successful operating centers?
5. Is the firm endorsed by any chiropractic association (local or state)?
6. Are the attorney fees reasonable?
7. How does the company propose to stand behind its work (basically to insure and certify that its work will stand in court)?

What Are the Pros and Cons of an MDC?

Pros:

1. "One-Stop Shop" - The patient, the most important asset of your practice, receives the fullest comprehensive care available.
2. Every Patient Benefits - In a "multicare" setting, patients with all types of health care problems will be treated, even if the condition is strictly medical (e.g., medication refill, pregnancy tests, cholesterol checkup, etc.).
3. Limited Insurance Coverage - A fully accredited medical setting is less restricted to any insurance limits or prejudice.
4. Greater Financial Reward - Across the country, as a generally accepted established protocol, the medical fee schedule is higher in billing, better in reimbursement, faster in payment and much easier in collections.
5. Patients Are More Comfortable - 98 percent of the population has been (and continues to be) seen by medical doctors and medical institutions. Owning a multidisciplinary clinic will make you part of the widest and most prevalent health care system, while keeping your philosophy intact.
6. HMOs, PPOs, and IPAs - The managed care arena is set up to minimize expenses while improving the efficiency of its health care delivery system. In an MD/DC/PT rehab center, the "best of all worlds" is present to procure just what your future is demanding.
7. Patient Retention - Because our society has been so trained to believe that medicine is the "only" answer to all health issues, MDs, DCs, and PTs working together will prove that there are many alternative treatments for the same condition.
8. Liability - Multiple specialists working together in one setting have a greater understanding of patients' needs and conditions, and therefore minimize liabilities.
9. Competition - Our generation of patients expect only the best - efficiency, timing, and savings. The "one-stop" clinic can deliver the most unadulterated care available.
10. Growth - Your center can develop as many entities as needed:
 1. medical: general medicine; neurology; physiatry; orthopedic care;
 2. musculoskeletal: chiropractic; physiotherapy; massage therapy;
 3. rehabilitation: physical therapy; physical medicine; occupational therapy;
 4. diagnostics: EMG; NCV; EEG; SSEP; SEMG;
 5. ancillary services: blood work; durable medical equipment; in-office testings;
 6. contracting: MRI; CT; diagnostic ultrasound;
 7. in-patient: hospital privileges; emergencies;
 8. out-patient: medical referral, medical network.
11. Personal Injury (PI) - The multidisciplinary center has the most comprehensive

documentation back-up necessary to satisfy the PI legal protocols.

12. Workers' Compensation (WC) - Employers, adjusters and patients attempting to receive efficient, thorough, diversified care will find multicare centers the only viable solution.

Cons:

1. Philosophy - If the DC is not well "anchored" in chiropractic philosophy, the center can lose its identity and become another medical clinic with a part-time DC.
2. Treatment Protocols - Issues will have to be discussed between the MDs and DCs until they're comfortable with each other's diagnostic and treatment protocols.
3. Personality - In the beginning stages there is often a personality clash between the MD and DC, caused mostly by the power struggle.
4. Expenses - There are definite increases in legal expenses and fees for consulting; billing staff; management time; MD salary, etc.
5. Marketing - New ideas and advertising budget will have to be reestablished.
6. Reputation - Friends, colleagues and relatives may think that the DC has "abandoned" the true purpose of chiropractic.
7. Confusion - At the initial stages patients will come in to this long-established chiropractic clinic and not understand why a new treatment protocol has been added, which can be perceived as an anti-chiropractic entity (if not established properly).
8. Liability - Not properly understanding the billing, as well as not having a proper health care attorney, can definitely jeopardize the viability of any future growth.

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