

Multidisciplinary Practices: A Necessary Step into the Future

About every one of the practice managers has been heard from. Some have lashed out against multidisciplinary practices without really knowing about it. As one of the original initiators of this model, I would like to share some optimistic views.

The multidisciplinary practice has been even more controversial than chiropractic itself. First of all it requires that two professions learn to work and play together by a new set of standards and rules: this includes compromise. Also required is getting insurance carriers to rethink their stiff postures about new services, reimbursement, newer protocols and procedures, new coding, and a host of other previously unacceptable ideas. Their prejudices against anything new, and the assumptions that all such new concepts are simply fraudulent attempts at bilking the insurance companies, will need to be re-thought.

Practitioners who think that changing to a multidisciplinary practice will make billing and reimbursement easier, need think again. If anything, the multidisciplinary practice is a more complex one. It calls for more detailed clinical and patient management, initialization and constant review of cost containment measures, better record making and keeping, increased staff size, and a giant leap into hiring a more educated staff with specific job acumen and degrees.

Once compliance is initially achieved, there's the need to monitor the ever changing and more strict compliance issues, regulations: the Kennedy-Kesselbaum requirements; the Stark I and II issues; the federal and state laws; and the medical/chiropractic board issues, both real and imagined.

I'm most often confronted with questions about the effect of the multidisciplinary practice on the chiropractic practice and philosophy. It's a good question. I have thought about it many times over these past five years. As I explain the pros and cons of conversion to and practice to many chiropractors, I always pick up on their fears that this new vehicle will water down chiropractic and "debone" the philosophy. The fear of our profession embracing the multidisciplinary practice and in damaging the chiropractic profession is as vivid to many practitioners as the negative picture painted by those chiropractic zealots who have forever stood in the background screaming doom and gloom; undoubtedly the same ones who have been responsible for the lackluster growth of our profession in the public's eye. Although totally unfounded, these evangelical "chiropractors" campaign to keep us fixated and subluxated into yesterdays ways and fortunes. The truth be known, no one can ever stand in the way of progress.

Whether going multidisciplinary will be a boon to our profession and the public at large, or our demise and the public's farewell to quality assurance, is yet to be written. We can openly direct a new chapter in our chiropractic history and in the future of health care. This is at last the opportunity for chiropractors to take over and to lead rather than tag behind. It's our opportunity to restore quality health care choices to the American public. It's our chance to move into the future as an integral part of the health care delivery system. If we are ever to take our rightful place in society we must stop being outsider "crazies," and work hard from within the

establishment to make changes and to assure our inclusion in the future of health care. If what we were doing for the past 50 years was correct, then don't you think we would be in a better position?

I have fought many legal battles to establish chiropractic and the rights of chiropractic patients. No sooner does a law pass than a new one supplants all we have achieved. The truth is that the real way to accomplish change is and has always been from the inside. It's true in politics; it's true in organizations; and it's true regarding changes in law. Surely the zealots must realize that 100 percent of nothing is nothing. I've been in practice for 38 years. I've managed hundreds of chiropractic practices and run my own seven practices. I was president of the Arizona Chiropractic Association and have been on the scene to observe our profession go from attracting a mere seven percent of the health care population back in the 1960s to attract about 10 percent in the 90s. After all of our outsider ranting and raving, in 38 years of effort we have only increased our patient pool population by three percent. By anyone's count, that number is representative of our profession's failure to establish a place for us in the marketplace of America. Yet our leaders continue recommending that we walk down the same path to doom.

We must change course and try to lead. A win would be nice. With the advent of the multidisciplinary practice, comes our profession's chance to re-invent itself, keeping the many wonderful things we have, but ridding ourselves of that which has cost us esteem, recognition, success, scorn and ridicule. Chiropractors have enjoyed a self-imposed exile from the establishment. We have actually relished and bragged about our lack of education or need for more by becoming proficient in sprouting metaphors. Our isolation has served to keep our ranks full of the undereducated, the nonmotivated, the quacks and misfits, the religious zealots, and those not held accountable to any standard. Yet with the multidisciplinary practice materializing and growing at such an unprecedented pace, this is our chance to establish our acumen; our thirst for knowledge; our intent to cooperate in cleaning out the misfits; and our desire to firmly implant rules and regulations that will benefit us and the community at large.

Having the opportunity to reach out for a higher standard shouldn't frighten us, but should enthrall us, because that alone secures our future. Continuing on in ignorant bliss is not the door to the future, but the trapdoor to oblivion. Chiropractors, CAs, MDs, RNs and other health care professionals must embrace this opportunity and must do whatever is necessary to upgrade their diagnostic and treatment skills, their office and personal appearance, and their ethics. This is a call for us to answer. We must revisit our protocols, procedures and our utilization standards. We must also rethink our advertising practices and how we present ourselves to the public.

The multidisciplinary practice avails us the opportunity to take our profession (maybe kicking all the way) to a better place: a place where we will be more accessible to patients, HMOs, PPOs and industrial users; a place where our profession can have access to 98 percent of the health care market, rather than the maybe 10 percent. The chiropractic philosophy needn't change one bit. We went from the now proven incorrect "garden hose" theory of how chiropractic works to the scientific explanation of neurothlipsis. That hasn't hurt us one tiny bit. We are stronger and better educated about how to remove subluxation and fixation. Our philosophy and art allows us to find subluxation and remove it. No other profession can do that.

The medical professionals who work in the multidisciplinary practice have no intent on destroying chiropractic's relationship to health. Psychiatrists, neurologists, orthopods and others simply want to do what they do best to help get the patient well. Because we don't use medications, patients have left our care prior to getting well, because they simply wanted a more rapid intervention to their pain. Allopathic medicine does not advocate medicate, medicate, medicate. Most medical physicians (at least those who work within the MD/DC practice) are a conservative lot and give only

what medication is necessary to achieve that "first aid" result; then they are glad to give you the opportunity to achieve a natural effect on the patient's condition. The medical physicians who work within the MD/DC model are not there to govern you, to order you, or to overpower our profession by sublimation. Like you, they want to see patients get well. Interprofessional cooperation, dual examination, similar and opposing view discussion, establishment and dual authoring of a treatment plan, all serve to make us better doctors who are more aware of our patients' needs and more able to serve those needs.

There are many multidisciplinary "management" or "compliance" firms, but they continue on in the time honored method of fear mongering for fun and profit. Beware of them. The multidisciplinary practice need not be complicated nor legally dangerous if practiced in an attentive and ethical manner.

The multidisciplinary practice is here to stay. It is in its infancy and will need to evolve into maturity. This will happen whether the chiropractic profession embraces it or attempts to degrade it. This is one moment in history where we can clearly set our own course. We can chose if we take the helm and direct it toward our dream, or sit back and again allow others to define who and what we are.

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