

Compliance, Due Diligence and Zero Tolerance

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Recently, I went to visit the office of a couple of young, newly graduated DCs. It was small. It could hold maybe four people. If a fifth person wanted to come in, someone would have to leave. The adjusting table was too long for the tiny treatment room, and it stuck out into the reception area. But these two fellows have something I don't have in my office: cheap expenses.

Like boiling a frog by slowly turning up the heat, overhead expenses have insidiously increased to a point that I am ready to move the practice into an abandoned school bus and hire my 93-year-old aunt to answer the phone. It has become very clear that in today's health care world, it's not what you make that counts - it's what you keep.

In the early days of managed care, companies that were putting together networks of doctors promulgated the establishment of "quality" in their contracted offices. That means they insisted upon all kinds of things in order to homogenize their "providers." I signed up and sent in the required pictures of my bathroom, proved I had a fire extinguisher under the sink, and paid more for the necessary higher malpractice insurance coverage. I did all this so I could be reimbursed *less*, as crazy as that sounds now.

But my cost increases were just beginning. I had to buy a fax machine so I could send information faster in order to get preauthorization for treatment. Then I had to hire a part-time employee to handle the increased paperwork, credentialing, re-credentialing, etc. When the Internet became the way to go, I had to finally buy high-speed Internet to keep up.

Of course, none of this has much to do with getting sick people well; but then, neither does the workers' compensation, and property and casualty insurance for which I have to pay. In a "quality" office, a doctor has to have this stuff. My staff has "quality" health insurance and wages. We have "quality" computers, and every few years we have to buy new "higher quality" computers. When they break, we call the computer guy, who comes over and says, "They're corrupted" and then gives me a "quality" bill for his 15 minutes of consulting. Last year, I once again purchased the upgrade software for my IT/billing system, since the company says they will somehow blow up my new flat-screen monitors if I don't. Do I have a service contract with them? Of course! I consider it protection money.

I have a faster printer, a faster copier, extra phone lines, and of course, a dedicated fax line. I'm getting my required continuing-education hours, the required CPR course and the new required documentation course. I have a laptop and better cell phone service now so I can take work home easier. When I pay the bills for all this, I can pay them faster and easier, because I have QuickBooks!

As I suggested earlier, the quest for "quality" in health care often has nothing to do with the effectiveness of treatment. I remember hearing of a chiropractor in the Midwest who grew up on the family farm and never left. After graduation, he went back to the farm and treated patients every day after coming in from the fields. His office was his machine shed, where he had an old door set up over two sawhorses (clamped on tight for patient safety). A patient who actually was

treated there told me the story: "On a summer evening, Doc gets down from the tractor, brushes off his jeans and starts adjusting folks. There's usually a line waiting for him, and you'd better have cash. He doesn't take checks."

Doc must have done a "quality" job, since he was busy treating people until 10 p.m., five nights a week. The story got me thinking: I wonder if my patients would tolerate it if I treated them in that refurbished school bus? After all, how much "quality" can I afford these days?

DECEMBER 2008