

## Keeping Up With the Joneses: The Times They Are a Changin'

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Gone are the days of pegboards and reams of paper - or are they? Many offices are going paperless and soon [electronic health records](#) (EHR) will be required; for those offices that have not embraced the new technology, it is time to get on board.

In my experience, a small percentage of chiropractic offices have gone paperless while the majority I have worked with in the past few years are not ready to make the transition. Yes, some are still using pegboards. Whether you are keeping up with the times or set in your ways, it is important to ensure that your patients' records are accurate. When was the last time you asked your patients to review the information in their file for accuracy? I recommend that you make an effort to verify the accuracy of each patient's records annually and while you are doing it, incorporate some of the data that will be required when you move to EHR.

Here are the areas you should review, ensuring the data in each patient's records is current, accurate and properly documented:

### Demographic and Communication Information

This includes the patient's name, mailing and residential address(es), home, work and cell phone numbers, e-mail address(es), employment information and student status. In this age of electronic gadgets, you may find that some patients no longer have home land lines and are using their cell phones for all phone and e-mail communications. You may not have received their e-mail address(es) when they first came to the office for care and if your software is current, you will be able to confirm appointments and send them [medical records](#), newsletters and other information of interest with the click of a mouse or push of the "send" button.

### Current Condition Including Diagnosis and Date of Onset

This includes present chief complaints; if their current condition is related to an accident, you will need to determine how, when and where it occurred. I have observed that many offices treat patients for years without updating this information, which in some cases results in claims being denied because care was not medically necessary, carrier requests for copies of the patient's records, and fines from state boards for poor documentation.

### Current Insurance Information

This applies even when you have a "cash" practice. Ask the patient for their insurance, partner's insurance and/or parent's insurance information and make a copy of their current insurance ID card(s). Complete a brief verification. Most carriers encourage you to verify benefits using their online tools. You should determine if the patient's benefits are the same as they were the previous year or if it is a new policy with the same carrier. With a new policy with a new carrier, do a complete verification of benefits.

It is not unusual to find that an established patient has the same carrier, but their benefits have changed. If you assume they are the same, it can have a negative impact on your accounts receivable. When you are [verifying benefits](#), it is also a good time to find out if the carrier accepts electronic claims; if they do and your software is capable of submitting electronic claims, be sure to get the payer ID number.

### Ensuring Accuracy

I have found that many patients are put off when they are asked to fill out an "Update Form." They will look at me and say, "Everything is the same." They don't even know what we have or don't have in their records. If your office has good practice-management software but has not gone paperless yet, print out the information you currently have in their records [name, address, phone number(s), e-mail address(es), employment information, emergency contact information, student status, chief complaints, insurance information] and ask them to review the information and make any changes directly on the form. If you are paperless have them review the information when they sign-in for accuracy and notify you of any changes. Don't forget to have the doctor verify that the DX and date of onset are current.

For those offices that don't have practice management software or the ability to print out basic patient information, I recommend that you give the patient an update form (if you would like a free sample form, please send me an e-mail to [lisa\\_bilodeau@hotmail.com](mailto:lisa_bilodeau@hotmail.com) with "Update" in the subject box) on a clipboard and ask them to complete it. If they don't want to fill it out and instead say, "Everything is the same" - in other words, nothing has changed - politely ask them to put their name on the form and write "Same" across it, and sign and date it. I would also stress to them that by doing so, they are accepting complete responsibility for any inaccurate information that may be in their file.

### Too Many Benefits to Ignore

For those of you who don't have practice-management software or have it, but need to purchase the most current version, I strongly urge you to make the investment today. Having the latest version of your software will enable you to keep up with the Joneses and comply with state and federal laws. You can save time and money by confirming appointments, sending newsletters to current and prospective patients; submit claims electronically, resulting in faster processing of claims; and take a step toward becoming compliant with future EHR requirements. Do it now and you may be eligible for PQRS and EHR incentives from Medicare, too. Although it takes some of that personal touch out of the equation, it allows us to maintain better communications with our patients and improves the quality of care they receive.

I have dedicated almost 30 years to the chiropractic profession and at times, I think it would be easier to retire now than to have to learn all that technology has to offer. Ronald E. Osborn said, "Unless you try to do something beyond what you have already mastered, you will never grow." I know that change is inevitable. We can refuse to change and grow, go kicking and screaming, or go gracefully. I don't know about you, but I would rather go gracefully (though I may kick and scream a little along the way). Together, we can do it - for the sake of the profession and the public we serve.

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