



CHIROPRACTIC (GENERAL)

## **What Are You Doing to Prepare for Obamacare? How Your Peers Do It**

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To help you enhance your practice and increase your bottom line, we ask practicing doctors of chiropractic, like you, for ideas and solutions that have been tested in real-world environments. In this issue, we asked: "What have you done to prepare for Obamacare?" Based on your responses, there are some very different philosophies in approaching the new health care mandate, everything from doing nothing to prepare to implementing new technologies and intake procedures.

### **Process and Procedure**

Even in specialty clinics, chiropractors are implementing changes to increase the number of patients they see. Dr. Jared Van Anne from St. Louis, said his office is focused on two strategies: "maximizing reimbursements by strengthening our systems to meet the toughest standards (Cigna) and developing and implementing more cash-related services."



"By developing and implementing more cash-related services, we will hedge against the lost insurance revenue with increases to cash revenue...the best kind! Another focus within this concept is to focus on extending value to existing patients. This will improve retention and longevity as well as open up other markets to bring new patients into the practice," said Dr. Van Anne. "We have a pessimistic view of what the ACA will bring, but we have a very optimistic view of how we will adapt to it so we can sustain our growth."

Dr. Jeff Malloy from Omaha said that he is simply, "implementing EHR and trying to improve documentation." A seemingly simple step that could bring huge results in the long run. But, Dr. John Dudley from Reno, took another tactic as he "made sure I'm not on any Medicaid provider lists."

Dr. Donald Ellis from Mobile, Ala., said that "given the fact there is going to be many more potential clients out there who have insurance coverage, we have contacted a local medical office who treats only those who are employed but have no insurance coverage. They work their fee scheduled based on the income of the client--the lower the income, the lower the co-pay. Because they see such a high number of uninsured clients, we reap the benefits on those that they would rather not treat for various reasons. Plus, they are employed. This healthcare facility is a serious referral group for us, and those who will fall between the cracks in Obamacare will hopefully be our patients for years to come."

#### New Treatment Offerings

Dr. Dennis Woggon from Minnesota is, "focusing on scoliosis treatment with the CLEAR Scoliosis Protocols. This is an important issue to patients and parents who aren't satisfied with the current medical treatment of scoliosis."

Dr. Ellis has also rolled a new plan for his practice that he believes is going to be very successful.

"The main push that we have promoted is our discount chiropractic/massage health card that we hand out in droves to our patients who, in turn, hand them out to their friends and family. We added a disclaimer that makes it exclusive to only those who have no insurance coverage. Of note," said Dr. Ellis, "you have to be careful though not to advertise your cards as 'insurance' since it's for discounted services only."

"Another positive factor," said Dr. Ellis, "is that it allows the patient to place the card in their wallet or purse, which gives the bearer the feeling of having something of value, which it does. It's a great marketing product and a greater value to our patients."

Dr. Robert Gage of Derby, Kan., said that "although we always make certain we have everything on hand for the processing of new patients and we are increasing our inventory of those items and making plans to increase our involvement in the community so we can fully inform individuals who may not have had access to chiropractic care in the past about their new coverage."

### Doing Nothing

"My first response to this questions is, nothing," said Dr. Susan Sykes of Clemmons, North Carolina. "I am skeptical of the pundits who state we must do something special because now so many people will have access to our care. I will continue to focus on individualized care, including instructions on nutrition and exercise, as well as other lifestyle factors in order to enhance the care I give. I have also ramped up my patient education, in that I explain subluxation at the first visit and every visit thereafter until they 'get it.'

"I also have been recommending lifestyle chiropractic care," continued Dr. Sykes. "I explain how we can get them out of pain but if they are interested in expressing their full health potential, it takes a lot more than that. One of the worst things I have done in the past is to let patients use chiropractic in the medical model. I let patients get care until they felt better and hoped they would then continue with care in order to stay better, but few of them did because that's not the dogma they are used to. Not, I talk about supportive (maintenance) care when I do their report at the second or third visit. Some still don't get it but those who do are the best patients in the world because they truly appreciate what I do."

While so much of Obamacare is still yet to be determined, it is clear that chiropractors have a variety of strategies for getting those potential patients to walk through their doors. As Dr. Gage said, "We are choosing to look at this as an opportunity."