

Bottom Feeders

Brian Wofford, DC, QME | DIGITAL EXCLUSIVE

Good day, colleagues. I am Brian Wofford, DC. I am a bottom feeder! I was sitting in Dr. Brian Porteous' CE class, which I have done for close to 30 years, when the subject of ASHP insurance reimbursement came up. There was instant resentment in the room with groans, (me too!), followed by an overview of why the reimbursement is so low. The answer: "Because they can. We sign up for it."

One chiropractor, in the midst of this conversation, sat high in his chair and proclaimed something to the effect of, "Leave it for the bottom feeders." I reeled. I was shocked and embarrassed. Did I hear him right?

Normally I stand up for the oppressed and the challenged. This time, I sat frozen. I was sick. He was right; I am a bottom feeder.

I quickly put my thinking in order and centered my mind on the class curriculum. I numbed myself for the duration of the class. I denied Dr. Olympus had said anything at all. Later, on the drive home, tired and feeling sober with low esteem, I recalled the event. I was sorry I had not responded. Our patients deserve better; and so do our bottom feeder docs.

Truth: I am a decent chiropractor. In sports as a youth, I excelled. I can do hand-to-hand combat with great glee. Not malicious, just fun for the pure physicality of sports: football, wrestling, rugby, baseball, basketball, etc. Play clean. Play fair. Ask for no quarter and give none. Shake hands. Game on!

But as a businessman, I am mush. Everyone knows it. However, the good Lord has blessed me to keep me in practice for 36 years. I am a widower and I have eight great kids. My youngest son, Eli, like his brothers and sisters, will graduate from college this year. I am a little too proud ... Eli passed on a full ride to play football at Harvard because "I'm not an East Coast guy, Dad." He made the right decision. *Have I?*

I always dealt with scraps and along the way; had some good cases, too. I never felt the strength of all the great docs who were disciplined enough and had the inner strength to say no except to the *cash*. Bravo for them, truly! I so respect and admire their intestinal fortitude and money management.

I re-examined the in-class scenario and with false righteousness, I wanted to turn back time and say something to make me feel better, but *truth is the truth; live with it, Brian. You played scared and not to lose in chiropractic. It is internal. Nothing to do with anyone else. You want better? Be better!*

I come from a long line of chiropractors: 11 or 12 in all; I lose count. I remember sitting in class with my parents, during the summers at Palmer, Iowa. In 1954, you needed a high-school certificate and cash to enroll in Palmer. If you did not have childcare, children were welcome to sit quietly. In the summers, B.J. would stroll down the hall, complete in white suit, shirt and tie, smoking a cigar. He liked me. He would pat me on the top of the head and smile. I was 4-5 years

old and I appreciated that. I did not know who he was; just that he was nice to me. My parents graduated and developed mega practices of their own, no insurance. Good, hard cash. Cash is king! They never played scared.

Many thought the advent of chiropractic into insurance was wonderful; and for a short while, it was: \$100 deductible, 80 percent reimbursement up to \$5,000. Glory hallelujah and amen, brother. Get me that Mercedes. One of my patients, Jeff, was the actuary who came to his company and suggested he could save his company money by accounting analysis of all medical reimbursements. He is doing well.

The actuary analysis, in my world, changed everything financially. It has for the medical profession as well. I recently was told by my patient and pediatrician, whom I am great friends with, that he is referring out his surgery cases. His fee is now \$600 for an operation and three months of post-surgery care, regardless of how many times the patient comes in.

I recently had a hip replacement. My great ortho cited that he was paid \$1,800 for my \$36,000 hip operation. The hospital received most of the rest. He said he was not totally complaining, as he has put his two children through college, but I recognized the tone of defeat in his voice. *Bottom feeder!* He is a top surgeon, and yet he feels trapped between the rock and the hard spot. Who has \$36,000 for a hip replacement?

Some of the finest people I know have this insurance. They are schoolteachers, preachers, police officers and firemen, EMTs, etc. They contribute so much to our community to keep our families safe. I am part of my community. My community has been great to me and my family for close to 40 years. Why wouldn't I treat these fine people?

In balance, I offer this: Our patients who are covered by insurance are fortunate. Any coverage relieves everyday stress. A patient with a jammed low back who cannot pick up their 3-year-old is miserable on several different levels. A patient with a heart defect, like my Mom, who was literally saved by chiropractic, can never pay us enough. We are called to help, so we do. Sometimes, we donate our services. None of us likes being leveraged against our dedication and our noble purpose, but...

"Nothing grows above the timberline. You grow in the valley, where all the muck is."

We are who we are, so I am grateful for all reimbursements. Everyone may think what they may and make their own choices. Regardless, I support us. God bless us all.

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