



PERSONAL INJURY / LEGAL

## Learn to Speak the Language of Personal Injury

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For many providers, personal-injury cases and working within the med-legal arena can often be a confusing and frustrating endeavor. After all, for the majority, personal injury is a niche. Within that niche are specific rules regarding med-legal procedures, clinical documentation, case management and more - sometimes called the "language" of personal injury.

Providers who aim to grow their PI practices, improve outcomes and build solid attorney relationships must learn and speak the language of PI. Here are three simple steps that can improve any practice.

### Take Time for Linguistic Basics

Before you can speak personal injury, you must first learn the "language" fundamentals and nuances. Step one: attend a PI seminar or educational course. This is important, since the language of personal injury is constantly changing and updating. Continual and consistent education on all the current literature, documentation, case management, and med-legal issues and arguments is essential. Without taking the time to learn these critical language elements, it is easy to be misunderstood.

Next, apply the new language into PI-specific office policies, protocols and procedures. General policies and procedures may work for other patient financial classes, but rarely for PI patients. In personal injury, it is not enough just to be an excellent treating provider; it requires time to create and customize the right tools.



Many providers do not realize that accepting any personal-injury patient places them squarely in the med-legal environment. Therefore, skipping this process can have significant consequences.

One simple way to begin applying the PI language is with the initial patient contact procedures; specifically, requesting and obtaining critical documents such as the automobile insurance declaration page, all accident-related photographs, pre-and-post injury medical records, and all insurance information. Seems simple enough, but if these are omitted or inconsistent, they can have consequences at a later date.

For example, the patient's automobile insurance declaration page is a must in order to analyze and protect any new case. The declaration page identifies coverage such as Med-Pay, PIP (personal-injury protection), UM (uninsured motorist) and UIM (underinsured motorist).

Providers must be aware of and look beyond just [Med-Pay and PIP](#) coverage. Providers who obtain and understand the patient's UIM/UM coverage improve their case success by avoiding costly treatment, management, negotiations and reimbursement mistakes.

#### Communicating With a Computer

Personal-injury "language" skills can also be applied when communicating with the automobile carrier evaluation software. There are now more than 80 different evaluation softwares utilized by the automobile carriers. In the majority of cases, third-party carrier outcomes are determined using this method.

The software evaluates provider management and documentation, assigns value for injuries and care and determines outcomes. Providers communicate with the software through both the content within the patient records and their med-legal reports.

The issue becomes, how does one speak human to a computer? The evaluation software is very specific in what it attempts to identify in the records. Therefore, it is imperative for providers to supply correct PI language. One example is patient home or self-care.

After a traumatic injury, it would be appropriate to recommend the patient perform some form of care at home to assist with the healing process. That could include ice, heat, stretching and may even involve certain activity avoidances. Many providers document the type of home care in the treatment record and leave it at that. However, what is often overlooked is the additional specific language the evaluation software is looking to identify.

In addition to the type of home care modality or avoidance, the documentation language must also include both frequency and duration of care; specifically, the number of times per day or week performed and the length of time in days or weeks. All three components are identified by the evaluation software, which then assigns value as a multiplier to every injury prescribed that home/self-care. This can significantly increase and improve the value of any case.

Imagine enhancing the value of cases with just a few documentation adjustments! That is just one of many powerful PI language skills providers must have in order to communicate with software.

### The Language of PI Attorneys

Another area of to apply PI "language" is with med-legal professionals, specifically attorneys. Personal-injury attorneys are unique to these types of cases and are unlike other patients in a practice. Providers who can speak PI will invariably reap significantly greater benefits when working with or marketing to attorneys. Attorneys rely on providers to assist and supply current documentation and management in order to obtain positive outcomes for the patient / client.

Attorneys also expect more from providers besides the ability to treat and get patients better. They require providers with specific PI linguistic competence. Those who can learn, speak and deliver are inherently more attractive as referral partners. After all, what attorney wants to send their valuable clients to someone who can't speak their "language?"

One example is the inclusion of an accident / injury med-legal causation statement. Far too many providers make false assumptions regarding accident causation. These can include, but are not limited to the following:

- The new patient verbally reported no similar symptoms before their accident; therefore, everything must be accident related.
- Causation is obvious, so it does not need to be formally stated.
- The provider documents causation based solely on experience or opinion.

All of the above are insufficient and easily discredited by defense attorneys or automobile carriers. In addition, they can make providers look foolish and incompetent.

Attorneys rely on providers to include a med-legal causation statement in every patient's clinical record at exactly the right time. Causation should be based on specifics such as the results of initial

office visit evaluations, the accumulation and review of pre- and post-accident medical records, etc. Each record should then incorporate a strong, accurate causation statement using specific med-legal language such as, "Within a reasonable degree of medical probability, the injuries were sustained as a result of..."

Providers who can be complete and thorough with both actions allow the representing attorney to demonstrate provider causation based on fact. Without them, it can leave the attorney, the case outcome, and the provider's records and bills vulnerable to insurance carrier and defense attorney tactics.

Learning a new language can be demanding, requiring work, dedication and practice. However, personal-injury fluency can also be extremely rewarding, with significant clinical and reimbursement benefits.

MARCH 2018