

Dynamic Chiropractic

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Credibility: You Might Have It With Your Patients, but What About the Rest of the Health Care Community?

"Credibility gap" and "consumer confidence" aren't terms you often hear tossed around a typical chiropractic office. In fact, I've probably just lost a good percentage of you in the first sentence by daring to start this column with such a dry topic. These are the concerns of politicians and market analysts – the kind of people whose mantra is "make it or break it" based on public perception of their performance and the image they project into the public sphere. We all know that doctors of whatever stripe aren't in need of building a trustworthy reputation. The only credibility we need comes with certification. *Right?*

If you said yes, then you're either still in chiropractic school or you've inherited a successful practice from your parents, because where the rest of us come from, credibility is the check we work hardest to earn. It's the reason we initially spent so much time on the little things of our practice, like creating a proper clinical environment: "Are these colors too serious? Or, aren't they serious enough?" Filling that credibility gap was the reason we debated those important questions, like "Can I get more respect as part of the local Kiwanis, or as a Rotarian?" And it's the reason we (if we're smart) continue to develop and nurture relationships with professionals on the other side of the health care aisle, even if it's just a mutual interest in handball or origami.

But, what if you chose the right colors, made the right connections, and you've shown your dedication to the community through your seminars on back injury prevention, but you still haven't reduced confrontations with third party payers, and the whole system seems a little tilted against you? How else can you possibly communicate "Trust me, I'm a doctor" to your patients and their health care plans? Don't they understand that you talk to public schools about backpack safety? Really, what's going on here?

I don't think I'm saying anything original or controversial when I say chiropractic has a credibility gap. The controversy begins when we try to explain *why* only 11 percent to 14 percent of the population will ever see a chiropractor in their lifetime when a far greater percentage will experience debilitating problems that even the strictest "evidence-based" doctors will admit demand a chiropractic solution. Depending on where I stand on scope

of practice, adjustment schedules and integration with other portal-entry providers, I'm likely to place the blame on those chiropractors I find philosophically disagreeable, and then on the health care system itself, in that order. Leaving aside our disagreements on points of philosophy, we all recognize the level of bias that still exists in mainstream American health care. (To view past articles surrounding the 2003 Trigon/Blue Cross/Blue Shield/Anthem anti-chiropractic conspiracy in Virginia, log onto www.chiroweb.com/dynamic/ and search "Trigon.") We also know there is not much that's going to change that system, when our own insufficient documentation practices fail to show the effectiveness of our approach.

Assuming ethics are a given, the main question is: How can we fill the credibility gap, and how can we do it immediately and effectively without getting lost in a debate about philosophy? The answer is simple: the right technology. The proper use of technology will help us increase our credibility, improve confidence among our patients and third-party payers and reduce unnecessary confrontations within the health care profession. If all goes according to plan (and I believe it will if we just *act proactively*), technology can reduce the stress of not getting paid for our services, and might even begin to reduce the remaining bias against our profession.

How can the right technology close the credibility gap? The most obvious answer is in the way it will standardize our documentation practices, improving their quality and consistency. As I've said in previous columns, delivering the evidence of our effectiveness to the medical bureaucracy requires us to conform to their definition of what proper documentation means. As uncomfortable as that might be, there's just no other way for us to continue to get paid in this post-OIG report era, except by fulfilling what the law requires for documentation standards. A technology that helps you to consistently and efficiently document your protocols is the first step in eliminating the institutional red flags that mark your payment claims with suspicion. And let's get this straight: There is simply no time whatsoever in a busy, successful clinic for proper, audit-ready documentation without some sort of technological assistance.

A less obvious way that technology can close the credibility gap is in exploiting the national push toward electronic medical records and digital documentation. While allopathic and allied health clinicians don't have to fight for the credibility of their treatments, they do face the same documentation requirements. For everyone involved, creating and maintaining viable, secure and HIPAA-compliant health records is a momentous task that takes away from one-on-one time with patients and cuts into clinic profit margins. Finding a more efficient documentation system is everyone's concern, and remarkably, chiropractors are poised to lead the way in this revolution of clinical practice. I have firsthand knowledge of allopathic physicians actually shutting down their practices to work within a multidisciplinary clinic under a chiropractor, drawn to that DC's clinic management program. The advanced nature of the chiropractor's electronic medical records and digital documentation program completely won him over.

If this concept seems far-fetched to you, you must not be aware of the way past anatomical and physiological research by chiropractors have influenced mainstream

medicine. Should we remind you that low back pain was a relatively small, ineffective allopathic market until chiropractors like Illi began researching sacral motion and the biomechanics of the SI joint? I think the same kind of revolution in medicine is possible if Chiropractors lead CAM practice integration based on the strength of their electronic medical records, documentation and digital practice management systems. As everyone is seeking a solution that will streamline clinic protocols and make documentation less of a hassle, this area is wide open and ready for confident chiropractors to make waves in their local communities, as well as building credibility for the rest of us.

We can never underestimate the power that comes with high-quality digital records. I have seen some of the most hard-nosed third-party payers and skeptical clinicians lighten up at the sight of a digital X-ray on a flat screen television or adjust their opinion based on the higher quality of organized and more graphical documentation, rather than the canned, repetitive, old-style electronic notes. As silly as it might sound, there's just no getting around the authority that comes with having a sleek documentation and clinic management infrastructure.

If you're still not getting how this works, just imagine what it would be like to fill out a loan application with a crayon or buy jewelry for your spouse from a card table on a street corner. These are all possibilities, but for one reason or another, they don't look right. You've understood that being a clinician means looking the part in a clinic-like environment. Your personal touch may be on everything in that clinic, but nevertheless, a perfect stranger would never walk in and mistake where you practice for an art studio or a recreation hall. Clinical documentation and records, and the technology you use to secure them, are no different. Technology can improve your clinic's efficiency, but as far as "furniture" goes, it will say more about your commitment to clinical excellence than the matching golf shirts you make your staff wear.

If you're saying, "That's fine, Dr. Kraus, but I'm not really interested in leading CAM practice integration in my clinic, I just want to be able to document faster," I would ask in turn: "Are you interested in receiving more referrals from MDs?" Because if you're interested in receiving more business from other health care providers (remember, they see 85 percent more of the population than we do), you'll essentially be instigating a CAM revolution in your community if you're successful.

This isn't about bringing medical doctors into your clinic. It's about bringing their patients into your clinic. It's about third-party claim reviewers perceiving the credibility of your care the only way they know how: by reviewing your records; and it's about how the entire health care community perceives the quality of care you deliver, by seeing results documented in your records, the professionalism of the records and the first-class image your records project. Patients can claim how great chiropractic was for them, but in the minds of the health care community, (i.e., the ones who pay you and the gatekeepers of the health care of more than half the country) the only exposure they have to your care are the records you send to them.

And as I touched on in my last column, you also would be way ahead of the curve in offering a first-rate response to HIPAA's call for "widespread use of electronic interchange in health care." That's a fact that will not go unnoticed by the folks who pay claims and the other members of your local health care community. And to me, that sounds like one simple, rewarding answer to bridging the credibility gap and building the practice of the future.