



RISK MANAGEMENT

Know What's Going On!

by **Stuart E. Hoffman, D.C., F.I.C.A.**

As the doctor in charge and the business proprietor, common sense dictates that you should be cognizant of every detail of your clinic operations, including all aspects of patient care, records and documentation, and the administration of all business, including, and perhaps especially, billing and collections.

In today's contentious environment, not knowing what has, or has not been done in your name, can have serious consequences. The lesson here is that you have no choice but to recognize

that you are responsible in the eyes of the law for what goes on in your clinic, and it is in your best interest to establish the systems and oversight mechanisms to avoid the common pitfalls, as well as the not so common ones, and stay ahead of problems before they ever develop.

This does not mean that you do not delegate, deploy proven systems or obtain outside expertise and audit assistance. It does mean that you are responsible and however you get it done, build in the kinds of checks and counter-checks that will prevent

problems before they happen.

Clinic Records

Starting with clinic records. It is vital to recognize every day that patient records are the doctor's responsibility. If you rely on staff to enter data, record and update information on each visit for each patient, you need to spot check every day to make sure that this important work is getting done, and done correctly so it puts you in the position of maximum defensibility if there should be any problem in the future.

Let your staff know that you are engaging in daily oversight, and never hesitate to give specific direction to correct mistakes, with the goal of having a smoothly running operation. Incomplete records, mis-filed documents, and un-recorded patient visit information can leave you exposed on a host of fronts, and they are all so easily prevented.

Patient Communications

Are you on top of all patient com-

munications coming from your staff? Do you know what is being said over the phone, when patients come in for their adjustments, or what is being mailed? Here, you have both quality control issues to look at, as well as possible confidentiality questions. A consistent, well-understood and well-practiced series of standard communications will help your staff perform more effectively, and also ensure that your patients receive standard communications and messages of which you approve, and which convey both the details and the attitude you wish to convey.

Billing and collections

Billing and collections is a huge arena for issues to emerge, often starting with staff communications about a balance due, a bounced-check or missed appointment. Here, written office policies on every potential point of controversy are essential, and need to be available to all patients as part of their routine education process, and known by heart by your staff. The old rule of thumb that about half of all malpractice claims start in the collections process remains true. This is both a stark reminder of your potential exposure in this area, and a reminder of how easy such exposure is to minimize.

There is an emerging dimension to the billing process that has cast a dark shadow on the doors of many of our colleague's clinics. This involves unintentional errors in claims submitted to third-party payment organizations, both public and private. Here, there is no substitute for complete accuracy, honesty, timeliness and comprehensive inclusion of all necessary data. Failure to file complete and accurate claims can at best waste time and delay payment. At worst, outright denial of claims or even accusations of abuse or misrepresentation are not beyond the realm of possibility. Here, consult with your colleagues on what is working and not working for them, and obtain the advice of billing experts, or secure the use of a proven claims filing software program.

The other element in the collections process that is possibly not so pleasant concerns the security of your collections. Here, the participation of an outside audit firm can give you enormous peace of mind by reconciling your receivables with what you have on your account books, and noting any discrepancies. Sadly, where money is involved, even the most trusted staff might need to be reminded that the collections process is being carefully monitored, and that they are to be held accountable on an on-going basis.

Conclusion

The successful practice is built on accountability, systematic quality and process control, and a doctor who is aware and alert to all dimensions of the practice. The good news is that this kind of oversight and management will pay off handsomely in efficient billing, effective collections, and minimized risk across the board. It is well worth the effort.

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Are You a **WHIZ** at Whiplash?



ANSWER THE 8 QUESTIONS below and show your stuff. If you only know an answer or two, you need to attend to fill the gaps with what you don't know: New knowledge!

- 1. WHY** do some patients have ongoing pain after all possible tissue healing has occurred, and can we help them?
- 2. HOW** can a D.C. explain, to the insurer or jury, how the patient was injured when the car wasn't damaged? What information is needed to satisfy both a jury and Colossus?
- 3. WHAT** are the biomechanical reasons for both acute and chronic pain, and how can we manage them nutritionally, without our patients having to resort to drugs?
- 4. IS** there a model based on Guyton's Textbook of Medical Physiology that can help me find, collect and correlate evidence of soft-tissue injury?
- 5. ARE** there randomized clinical trials comparing chiropractic adjusting to the drugs Celebrex and Vioxx in the management of chronic spine pain, and how well did chiropractors do?
- 6. WHAT** diagnostic testing best shows the injuries we manage as chiropractors?
- 7. WHY** is the history the most important part of the examination?
- 8. WHY** would an insurer find chiropractic compared to medicine or PT the treatment of choice?

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