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PATIENT COMMUNICATIONS

ALONG WITH OUR ANNUAL FEES & REIMBURSEMENTS SURVEY RESULTS, our Patient Communications issue has you covered in creating the perfect patient experience, from first (and last) impressions to reactivating your ideal patients, increasing referrals, and “turning your patient data into marketing gold.”

“My favorite method is a monthly re-occuring membership for patients who have finished my care plans,” writes Naota Hashimoto, DC, on communication to keep patients in care and strengthen your practice. “It increases the value of your business if you were to sell it, and those patients are the most straightforward and appreciative in your practice. In addition, they are likely your advocates in your community and will refer more than other patients.”

Review how you are keeping in touch with patients and compare it to our experts’ advice.

Standard Process feeds the U.S.

In a time of great need in the U.S., Standard Process for the seventh straight year is filling food banks across the country.

The whole-food supplement maker announced in August the donation of 67,000 meals to a network of more than 200 food banks across the nation as part of the company’s ongoing commitment to change lives through whole food nutrition. The donation — which supported Feeding America® — was made possible through the company’s 7th annual One Day, One Bottle, One Meal event.

Standard Process has donated one meal for every Standard Process, MediHerb®, and Standard Process Veterinary Formulas™ product sold since the one-day event launched in 2016. The effort has resulted in more than 444,000 donated meals to help fight hunger across the country.

FCA’s The National

The end of August saw the “World’s Largest Event for Chiropractic” held in Orlando where more than 2,250 doctors of chiropractic, chiropractic assistants and other attendees came together for The National, presented by the Florida Chiropractic Association.

“IN ADDITION, THEY ARE LIKELY YOUR ADVOCATES IN YOUR COMMUNITY AND WILL REFER MORE THAN OTHER PATIENTS.”

Many thanks to the DCs who came by the Chiropractic Economics booth to say hello, and the more than 300 exhibitors and vendors that made for a bustling show and exhibit floor.

The Foundation for Chiropractic Progress (F4CP) hosted its first ChiroThon, a live and virtual event celebrating the chiropractic profession and running throughout the weekend.

“We wanted to bring back the fun and excitement of the Labor Day telethons of our youth and give it a 2022 spin to raise awareness and funds that will help spread uplifting, factual information about chiropractic care,” said Sherry McAllister, DC, president of F4CP. “We could not think of a better time or location to host ChiroThon 2022 than at the largest gathering of doctors of chiropractic.”

ChiroHealthUSA also announced the recipient of the Foxworth Family Scholarship, Dustin Biggerstaff, a student at Life University. For the seventh consecutive year, a chiropractic student was awarded a $10,000 scholarship, $5,000 cash, and a $10,000 donation was made to the student’s chiropractic college. The Foxworth Family Chiropractic Scholarship is fully funded by ChiroHealthUSA and was established in honor of President Dr. Ray Foxworth’s parents, Dr. Betty Pace Mathews and Dr. Charles Vernon Mathews.

“It is important for me to give back to a profession that has meant so much to me and my family,” Foxworth said, “not only as tribute to my parents, but as an opportunity for chiropractic students to follow in their footsteps.”

To your practice’s success,

Richard Vach
EDITOR-IN-CHIEF
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NBCE announces 3 new board members

The National Board of Chiropractic Examiners (NBCE) announced the following new directors who were recently seated on the board in 2022:

Gary Dillenroette, DC, DACAT, LCP, DPHC, FACAT, will serve as the district III director (Pennsylvania, Vermont, New Hampshire, Maine, Massachusetts, Connecticut, New York, New Jersey, Rhode Island, Delaware, Maryland and Washington D.C.).

Danita Thomas Heagy, DC, will serve as the district V director (Louisiana, Arkansas, Mississippi, Alabama, Georgia, Florida, Tennessee, Kentucky, North Carolina, South Carolina, Virginia, West Virginia, Puerto Rico and U.S. Virgin Islands).

Col. Steven Roberts, JD, LLM, will serve as an at-large director.

ChiroEco.com/NBCE-3

ACA endorses mattresses from 2 brands

The American Chiropractic Association (ACA) has endorsed several mattresses from Brooklyn Bedding and Helix Sleep, sister brands that build mattresses on demand and in a variety of comfort levels.

ACA endorsed five models: Brooklyn Bedding’s Plank Firm and Plank Firm Luxe, and Helix’s Midnight Luxe, Twilight Luxe, and Plus. The mattresses were evaluated based on factors including workmanship, ease of assembly, comfort and more. “ACA is pleased to endorse Brooklyn Bedding’s mattresses. Sleep is an important aspect of overall health, and a comfortable and supportive mattress contributes to better quality sleep,” said ACA President Michele Maiers, DC, MPH, PhD.

ChiroEco.com/mattresses

Okahaven awards

Sherman College for “Have a Heart” support

Children’s chiropractic center Okahaven has recognized Sherman College for its support during the 2022 “Have-a-Heart” campaign. Okahaven’s CEO, Bobby Doscher, DC, presented the College Award to Dean of Clinics Brian Dooley, DC, ACP, on Aug. 22.

The award is presented to the chiropractic college and clinic that raises the most funds for Okahaven and its mission of healing children through chiropractic and educating parents on the chiropractic way of life. Okahaven, established in 1962 in Oklahoma City, Okla., is a nonprofit that provides chiropractic care for children, specifically those with chronic illness and disabilities.

ChiroEco.com/oklahaven

Do you do webinars?

Webinars are an easy, cost-effective way to promote your chiropractic practice. These live, web-based seminars can help build relationships with your existing patient base and expand your reach to attract new patients. With webinars, you can:

1. Establish yourself as an expert. Use webinars to educate patients about your services and the conditions you treat. This strengthens your position as an industry leader and expert.
2. Maximize visuals. Use your webcam! Your webinar will have more impact when people can see into your eyes. Go all out with visual PowerPoint slide content too; if necessary, hire a designer to give your slides the impact they need.
3. Invite guests. Do you have multiple providers in your practice, such as a massage therapist or acupuncturist? Invite them or other practice team members on your webinar for an interview-style conversation. Do you have a relationship with any local influencers, such as athletes, business owners or celebrities? Leverage their popularity and ask them to promote the webinar to their following.
4. Do follow-up marketing. When someone registers, they provide their contact information. This gives you the opportunity to follow up with an offer to receive more information about your products or services, opening the door to future conversations. Also, post the webinar recording on YouTube or Vimeo and send a link to those who registered but couldn’t attend. (It is not unusual for more people to watch the recorded webinar than those who attended live.) — Mark Sanna, DC, ACHR Level II, FCC.

Use the hashtag #CE for the chance to be featured on our Twitter @ChiroEcoMag

Coding & Billing Horror Stories

When Compliance Goes Sideways

ChiroEco.com/magazine
The TOP TEN reasons that we became #1 In Spinal DISC Treatment and the LARGEST Group of BRANDED Non-Surgical Spinal Decompression Centers in the World and now the ONLY Chiropractic Coaching Group with a WAIT-LIST to join.

#1 - WE are NOT a Franchise. It is our opinion that NO ONE should ever take a percentage of the money you make. You should keep EVERY single dollar you make and not be obligated in any way.

#2 - We are an educational group, a coaching and advising group known as CONCIERGE COACHES, (Drs.Kaplan-Bard) We know that by educating you correctly with the right training, content, workshops, bootcamps, masterclasses, National Certifications and more, we provide the MOST COMPREHENSIVE training to become the BEST DOCTOR you can, the true SPECIALIST that you aspire to and the DOCTOR that you would want to send your family to.

#3 - We provide all of our award winning brands to our family of Doctors for FREE including our most popular "DISC Centers of America" brand.

#4 - We provide all the AMMUNITION which are all the BRANDED and PERSONALIZED tools for creating your CELEBRITY and positioning you with the RIGHT MARKETING all personalized for you absolutely FREE to attract the MOST QUALITY patients thru your doors every day.

#5 - We provide ALL of your forms and COMPLETE GRAPHIC DESIGN for FREE, (YES FREE).

#6 - All training BOOTCAMPs that teach you the protocols, the systems, the management, the financials and the marketing for ALL of your programs (Decompression, Neuropathy, Knee, Personal Injury, Weight Loss, etc.) are provided to you 100% for FREE always with NO LIMIT on how many you want to attend.

#7 - We teach a PRIMARY Cash Driven model with many of our Doctors collecting over $100k, $200K and $300K+ per month. Remember that INCREASED CASH FLOW creates INCREASED FREEDOM.

#8 - We have the longest track record for success. Dr. Kaplan and Dr. Bard have been together for OVER 35 years & YES, Dr. Bard was actually Dr. Kaplan’s Associate Doctor. Relationships are everything to them as they have been married to their wives for a combined 73 years. They also each own multiple properties with an amazing net worth. They practice EXACTLY what they preach with an UNMATCHED Chiropractic resume and together they have created MORE Million Dollar+ practices than any 2 coaches in the history of the profession.

#9 - They provide UNLIMITED and FREE access to them individually for their “Family of Doctors” via emails, toll free hotlines and personal cell phones.

#10 - Their legacy is their family and their children. They have 2 boys each. Dr. Kaplan has 2 sons. One is an M.D. and one is a Multi-Million Dollar Chiropractor in his mid thirties. Dr. Bard also has 2 sons. One is a Dentist and one will graduate Chiropractic school in 1 Year.

YES, the FUTURE is SO BRIGHT for Chiropractors who have the RIGHT Coaching, the RIGHT BRANDS, the RIGHT Marketing and the RIGHT Training.

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Four out of five adults will experience at least one episode of back pain at some time in their lives. And did you know that back pain can come from a variety of sources such as core strength, stiff hips, disc bulges, or simply poor posture?

Chiropractic adjustments can help sore or painful horses! Adjustments can help manage chronic or acute injuries to the skeletal and muscular systems.

Good showing at the Talsky Tonal Chiropractic seminar this past weekend. We are eternally grateful to Dr. Marvin Talsky himself for teaching us his life’s work.

Chiropractic adjustments can help manage chronic or acute injuries to the skeletal and muscular systems.

When you decide to pursue or do something for the rest of your life, the only way to be successful is to put your whole heart into it.

Like the great Dr. B.J. Palmer would say...enuf said!

How many degrees have you lost? I tell clients all the time that pain is the last thing to show up and the first thing to go away.

A joint that loses 1 degree of movement will show measurable degenerative changes within 1 week.

The only way to do great work is to love what you do - Steve Jobs

The only alternative to chiropractic is living a life of less than full expression.

Happy Monday! We are wishing you a wonderful week!

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CONFERENCES
AND WEBINARS

SW Regional Convention and Expo by Florida Chiropractic Association
November 18-20 • Naples, FL
The FCA provides DCs with the tools to propel your practice to new heights at the Southwest Regional Convention & Expo. DCs and CCPAs alike will learn from international experts in this intimate educational setting. Join your colleagues and internationally known speakers, virtually or in person.

The Foot-Spine Connection: Understanding Why It’s Important for You and Your Patients
November 23 • 1-2 p.m., online
The feet and arches are the foundation of our human house. Problems here will lead to pain in the ankles, knees, hips, pelvis and back. This journey with Dr. Kevin Wong will help familiarize you with the feet and some common names of conditions you may hear patients mention when they call to schedule.

FEATURED WEBINAR

Gut-Immune Axis and Gut Barrier Function
On Demand
This course details nutrients and other compounds that help promote healthy intestinal barrier function and immune health within the gut, with a focus on the clinical benefits of serum-derived bovine immunoglobulin concentrate and N-acetyl-D-glucosamine (NAG).

Learn more at chiroeco.com/events.

INDUSTRY NEWS

Two DCs reappointed to AMA’s Health Care Professional Advisory Committee
Two members of the American Chiropractic Association (ACA), Leo Bronston, DC, MAAppSC, and Kris Anderson, DC, MS, were reappointed to represent ACA as advisors to the American Medical Association’s Health Care Professional Advisory Committee (HCPC).

Bronston, of Onalaska, Wis., who currently serves as ACA vice president, will serve as ACA’s primary HCPAC advisor and Anderson, of Grand Forks, N.D., will serve as the alternate advisor for the next three years. Both provide leadership and expert guidance on ACA’s Coding Advisory Board and Payer Collaborative Task Force.

Members of HCPAC are chosen from organizations representing limited-license practitioners and other allied health professionals. The committee, along with AMA’s CPT Advisory Committee, serves as a resource for the Current Procedural Terminology (CPT®) Editorial Panel, providing advice on procedure coding and appropriate nomenclature as relevant to their specialties.

“These appointments give ACA and chiropractic an important seat at the table in coding matters that affect the entire profession,” said ACA President Michele Maiers, DC, MPH, PhD. “Drs. Bronston and Anderson continue to be excellent representatives for ACA and the profession in the national health care community.”

For more information, visit acatoday.org.

AWARDS NEWS

Life University receives two chiropractic research awards
Representatives of Life University’s Dr. Sid E. Williams Center for Chiropractic Research (CCR) brought back two prestigious awards from the 28th Educational Conference and Research Agenda Conference (ACC-RAC 2022) hosted by the Association of Chiropractic Colleges (ACC) in July in California.

The overall theme of this year’s conference was “Wellness and Health Promotion: Impact on Chiropractic Education, Clinical Practice and Research.” The university received two awards for National Board of Chiropractic Examiners Outstanding Education Paper.

The academic listings are:
• Chiropractic students’ perception of online learning during the COVID-19 pandemic. Kuyinu, E; Sullivan, S; Drake, E; Hayes, K; Garlinghouse, A
• A Chiropractic Practice-Based Survey designed to evaluate Patient COVID-19 Symptoms and Severity in relation to Patient Characteristics, Health Practices, and Chiropractic Care use. Minicozzi, S; Sliwka, M; Drake, E; Hayes, K; Sullivan, S

Listed contributors to these projects include Stephanie Sullivan, DC (CCR director), Emily Drake (research scientist), Kate Hayes (technical research scientist), Austin Garlinghouse (research lab coordinator), Eniabiti Kuyinu, DC (alumna), Maggie Sliwka, DC (research clinician) and Salvatore Minicozzi, DC (former faculty member).

The CCR was created in the fall of 2014 to expand Life University’s commitment to the profession through research.

For more information, visit life.edu.
Non-nutritive sweeteners have long been believed to have no effect on the human body, but researchers publishing in the journal Cell on Aug. 19 challenge this notion by finding that these sugar substitutes are not inert, and, in fact, some can alter human consumers’ microbiomes in a way that can change their blood sugar levels.

Senior author Eran Elinav, an immunologist and microbiome researcher at the Weizmann Institute of Science and the German National Cancer Center (DKFZ), and his team found that non-nutritive sweeteners affected the microbiomes of mice in ways that could impact their glycemic responses. The team was interested in whether these results would also be found in humans.

To address this important question, the research team carefully screened over 1,300 individuals for those who strictly avoid non-nutritive sweeteners in their day-to-day lives and identified a cohort of 120 individuals. These participants were broken into six groups: two controls and four who ingested well below the FDA daily allowances of either aspartame, saccharin, stevia or sucralose.

“In subjects consuming the non-nutritive sweeteners, we could identify very distinct changes in the composition and function of gut microbes, and the molecules they secret into peripheral blood. This seemed to suggest that gut microbes in the human body are rather responsive to each of these sweeteners,” says Elinav.

For more information, visit sciencedaily.com.
NWHSU defines future of integrative care in new position paper

Northwestern Health Sciences University (NWHSU), the evidence-based integrative health institution in Bloomington, Minn., in August released its integrative care position paper, “Integrative Care: Creating a Healthier, More Sustainable System,” calling on health care industry organizations, associations and professionals to challenge the current approach to care and create a more holistic and sustainable system.

In an integrative health care system, the goal is health creation: moving beyond symptom and disease management to create resilience for individuals, communities and the health care system. To achieve this, organizations need to leverage a broad health care workforce, without distinction between “complementary” and “mainstream” care.

“The pandemic, opioid crisis, and social uprisings of the last few years have shined a light on how our current health care model is failing to actually make people healthier. Implementing components of integrative care can move the needle: seeing patients as whole people, looking at care as inclusive of work beyond traditional health care, and leveraging a transdisciplinary care team,” said Michele Renee, DC, MAC, director of integrative care at NWHSU. “We are training the next generation of health care professionals to put the patient at the center of care and influence systems to change how care is delivered.”

Integrative health care systems are best when co-created with a range of stakeholders, says NWHSU, calling on the industry to consider:

• Providing enhanced opportunities for interprofessional education, making space for providers and stakeholders to learn from one another and work collaboratively.
• Coordinating a wide range of clinical and community resources for patients, emphasizing health creation.
• Eliminating the idea of “complementary” and “mainstream” health care, replacing the dichotomy with an approach that prioritizes the right care at the right time.
• Aligning payment models with health care outcomes, shifting away from a transactional model and toward one that supports whole-person well-being.

For more information, visit nwhealth.edu/news.

PROFITABLE PRACTICE

Chiropractic Newsletters

Send a monthly health and wellness newsletter to your patient list to educate, reactivate and stay top-of-mind.

Why send a practice newsletter?
Mention chiropractic newsletters to veteran chiropractors and you’ll get a knowing nod:
They work. They allow you to:
• Educate patients with health and wellness content
• Reactivate patients with this monthly email “reminder”
• Stay top-of-mind with regular communication
But chiropractic newsletters can be a lot of work to produce. That’s why many have abandoned this surefire chiropractic marketing tool. But not if you have the Perfect Patients website service!
Your monthly practice newsletter is written for you and sent to your patients on your behalf (we send it to you ahead of time to review and approve, of course).
To learn more, go to perfectpatients.com/practice-newsletters.
Proteo-Zyme™

Fight Inflammation—Improve Digestion*

• Nutritionally supports the body’s natural response to inflammation and supports the digestive system and intestinal health.*

• A healthy gastrointestinal tract can lead to a better quality digestive health from stomach pains and other issues such as the effects from an irritable bowel.*

• Proteo-Zyme is a digestive enzyme supplement that provides synergistic proteolytic enzymes. These enzymes help digest food, break down food, and break down proteins leading to a smoother running digestive tract.*

Our formula contains

Proteolytic Enzymes

PROTEO-ZYME is a daily enzyme supplement that ensures a smoother operating digestive tract. The optimal breakdown of proteins and food help your body’s natural response to inflammation.*

*These statements have not been evaluated by the Food and Drug Administration. These products are not intended to diagnose, treat, cure or prevent any disease.
26TH ANNUAL FEES & REIMBURSEMENTS SURVEY

UPS & DOWNS, BUT HOLDING STEADY

The resilience observed in last year’s Fees & Reimbursements Survey continues

BY ALLISON M. PAYNE

FROM 2018-21 WE SAW AN OVERALL LEVELING OF FEES AND REIMBURSEMENTS. This year, we observed a slight increase in the average fee per service, while there was a drop in reimbursement, so essentially the same services are now yielding less revenue, according to our survey respondents. On a brighter note, we did observe an uptick in the number of female chiropractors who took our survey, a suggestion that the percentages of each gender are leveling out, after a reduction last year. The field is becoming more equally divided between men and women, which reflects the divide in the enrollment in chiropractic colleges.

Our annual Fees & Reimbursements Survey went out in August, when most aspects of life had largely settled into a post-pandemic new normal. As of the time of this publication, monkeypox has largely taken over the national conversation, with COVID-19 becoming part of the fabric of this new normal; at this point most people who want to be vaccinated have been, though health care professionals are still recommending booster shots as new variants evolve.

“COVID-19 continues to circulate globally, however, with so many tools available to us for reducing COVID-19 severity, there is significantly less risk of severe illness, hospitalization and death compared to earlier in the pandemic,” the Centers for Disease Control and Prevention noted in an August press release on cdc.gov.

Our survey results show slight declines and upticks here and there with fees and reimbursements, suggesting that chiropractic is primed for a resurgence as we put the COVID chaos behind us. This flattening comes after a slow decline up until 2020, when average fees settled at $60; 2021’s average fee ticked up a bit, to $63.64, and held steady at $64.09 again this year. Reimbursement averages, after increasing from $41 in 2020 to $44 last year, dropped several dollars to $38 this year, which indicates a 2022 reimbursement rate of 61%, an 8% drop from 2021’s 69%.

One issue we are still keeping a close eye on that could impact fees and reimbursements in the future is HR 2654, the Chiropractic Medicare Coverage Modernization Act of 2021, sponsored by Rep. Brian Higgins (D-NY). This act would increase Medicare coverage of services provided by chiropractors within the scope of their licensure, meaning chiropractic patients could seek some covered services from chiropractors rather than MDs. As of the time of this publication, this legislation has not moved forward beyond the subcommittee stage.

As always, our survey is subject to statistical variation, and all figures herein presented should be considered approximate. Normal fluctuations in most categories occur year over year, and we suggest that our results are best used for spotting general trends to guide strategic planning.

On the following pages you will find a few key points from this year’s Fees & Reimbursements Survey.
West, Midwest lead reimbursements again this year
The West led regional reimbursement rates in both our 2020 and 2021 surveys, and that trend continues this year; it reported the highest reimbursement rate in 2022 at 78%. The Midwest came in second place with a reimbursement rate of 57%, followed by the South (53%) and the East (49%).

Going solo
As usual in this survey, most DCs (70%) work solo, with no other DCs in the office. When asked what type of specialists they work with in their practice, the largest number of chiropractors, also as usual in our survey, said “none” (41%). The other portion reported a variety of specialists, the most popular being licensed massage therapist (23%, down from last year) and acupuncturist (9%, the same as last year).

### PROFILE OF RESPONDENTS

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<thead>
<tr>
<th>PERSONAL CHARACTERISTICS</th>
<th>2022</th>
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<td>69.5%</td>
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<td>FEMALE</td>
<td>30.5%</td>
<td>26.8%</td>
<td>27.9%</td>
<td>30.4%</td>
<td>27%</td>
<td>22%</td>
</tr>
<tr>
<td>AVERAGE AGE</td>
<td>52.9</td>
<td>51.3</td>
<td>50.68</td>
<td>50.2</td>
<td>50</td>
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<td>25-92</td>
<td>24-83</td>
<td>22-81</td>
<td>27-81</td>
<td>27-79</td>
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<td>24</td>
<td>22.4</td>
<td>20.6</td>
<td>21</td>
<td>21</td>
<td>21.8</td>
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</table>

### TYPES OF PRACTICE

| SOLO                      | 70.3%| 71.2%| 64.7%| 69%  | 63%  | 65%  |
| GROUP                     | 24.2%| 20.1%| 24.3%| 21%  | 24%  | 28%  |
| ASSOCIATE                 | 3.5% | 5.7% | 5.9% | 3.8% | 7%   | 3%   |
| IN A FRANCHISE OPERATION  | 1%   | 0%   | <1%  | 4.9% | 6%   | 4%   |
| INTEGRATED HEALTH CARE PRACTICE (DC+MD/DO) | 1% | 0% | <1% | N/A | 6% | 8% |
| CASH-ONLY PRACTICE        | 16.7%| 19.8%| 19.8%| 16%  | 12%  | 10%  |

### FEES AND REIMBURSEMENTS

<table>
<thead>
<tr>
<th></th>
<th>2022</th>
<th>2021</th>
<th>2020</th>
<th>2019</th>
<th>2018</th>
<th>2017</th>
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### GEOGRAPHIC LOCATION

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<th>2020</th>
<th>2019</th>
<th>2018</th>
<th>2017</th>
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<tbody>
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<td>WESTERN REGION</td>
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<td>22%</td>
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<tr>
<td>OUTSIDE U.S. / UNSPECIFIED</td>
<td>3%</td>
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<td>4%</td>
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### LICENSURE

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<th>2018</th>
<th>2017</th>
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<tr>
<td>ONE STATE</td>
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<td>79%</td>
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<td>80%</td>
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<tr>
<td>TWO STATES</td>
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<td>17%</td>
<td>17%</td>
<td>14%</td>
</tr>
<tr>
<td>THREE OR MORE STATES</td>
<td>3%</td>
<td>5%</td>
<td>6%</td>
<td>4%</td>
<td>6%</td>
<td>6%</td>
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### About this survey
During August 2022, Chiropractic Economics extended an invitation to readers to complete a web-based survey on fees and reimbursements. Additionally, we encouraged a number of state, national and alumni associations to distribute the survey to their members (thank you to all organizations!).

We limited survey participants to practicing chiropractors or their designated office managers or CAs to ensure accuracy.

- **Number of participants:** This year’s analysis is based on responses from 301 respondents.
- **Regional distribution:** Participants hailed from the South (31%), the Midwest (26%), the West (22%), the East (17%), and “other.”
- **Averages:** Unless indicated otherwise, all numbers are averages.
- **Cash-only practices:** Cash-only practices reported fees only.

Our survey results are provided for informational purposes only. They are not intended to be used as a recommendation for setting fee levels.
invisa-RED™
The Only Non-invasive Laser FDA, IRB, & Clinically Proven For: Fat Reduction, Weight Reduction, and Inch Loss.

Earn An Additional $10,000 - $15,000 Per Month

- invisa-RED™ Elite 12 Paddle Device
- Turn Key Business System
- Patient Nutrition & Lifestyle Guide
- Ongoing Training & Support
- Unlimited Marketing Support
  (Ad work, Content, Design, etc.)
- On-site Training, Installation, and Sales
- Demo Days Averaging $20,000+

INSTANT BUSINESS SUCCESS

Dr. Laura Carithers
$37,200 first 48 hrs

Dr. Justin Dempsey
$70,000 in first 48 hrs

Dr. Aaron Rose
$34,020 in first 48 hrs

Dr. Moe Hazimi
$30,000 on day 1

Dr. Robin Ownings
$28,000 on day 1

Dr. George Hoogeveen
$42,930 in first 48 hrs

Dr. Joshua Carr
$45,000 in 30 days

Dr. Brandon Wilson
$26,500 in 48 hrs

470.826.4533
invisaRED.COM
invisa-RED™ - Clinicaltrials.gov (NCT03811093)
Laser Fat Reduction, Weight Reduction, and Inch Loss

Study Type: Double-Blind (Randomized)

Outcome Measures:
1. Body Fat % Lost: 1.75% avg.
2. Pounds of Body Fat Lost: 4.53 lbs. avg. (1/2 lb per treatment)
3. Inches Lost: 10.16 inches avg.

Confidence Interval: 95%
Device Cost: $$ (You Own Device, No Cost Per Use)

Our Technology

Dual Coherent Frequencies Interference

Photobleaching Laser Pulse Tempo

Skin Tightening, Stretch Mark, Cellulite Contouring, Weight Loss, Fat Reduction

470.826.4533 invisARED.COM
FDA | IRB | Clinically Proven

TURN KEY BUSINESS SYSTEM

• All Cash Service
• Unattended Service
• 15 Minutes Per Treatment
• 2-3 lbs. Fat Loss Per Week
• Low Patient Acquisition Cost
• Non-invasive Class II Device

PROVEN RESULTS

• FAT REDUCTION
• WEIGHT REDUCTION
• INCH LOSS

ON-SITE TRAINING
WHITE GLOVE DELIVERY AND INSTALLATION

MARKETING INCLUDED

20-30 Pr-qualified Consults Per Month

BECOME AN invisa-RED™ PROVIDER TODAY!

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IT’S NEVER BEEN EASIER TO GENERATE REVENUE FOR YOUR PRACTICE
Clinics Average Over $20,000 During Our On-site Launch Event

“We followed the plan with exactly what they said and they came out in 2.5 days. We smashed the record - we did $70,000 in cash sales.”
- Laura Dempsey, Premier Health & Wellness Center

“We are just finishing up our last day of our invisa-RED demo days. So far I’m completely blown away—we’ve done over $30,000!”
- Angela Cox, Anthony Medical & Chiropractic Center

“In the last three days we had an average inch loss of 2.32 inches from all of the patients and we collected a total of $36,000. I just can’t say enough great things about them. They’re amazing at the work that they do. They’ve really helped our clinic.”
- Christopher Blaha, Motion Medical Center

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Wouldn't you rather spend your money on something... fun?

Over your career, ECLIPSE® can save you $60,000 or more in monthly payments alone!

And that's just the tip of the iceberg...

More experience running our own busy multi-disciplinary practice · More experience growing small client practices into behemoths · More experience working with payers, auditors, & investigators · More experience saving you money · Thousands of practices · Tens of thousands of users.

1.352.488.0081 · www.INeedECLIPSE.com
Cash remains popular
Cash-based practices had been on the decline, according to our yearly survey results, before making a jump in 2018. In 2016, 13% of practices were cash-only, decreasing to about 10% in 2017. In 2018, that number leapt to 19.9%, and then dropped in 2019 to 16%. In 2020 the percentage of cash-based practices bounced back from that dip, coming in at 19.8%, and dropped a bit to 17% this year. Thirty-four percent of 2022 survey respondents reported they collect up to 25% of their fees in cash — and 23% get more than 75% of fees in cash.

How patients pay you
According to our 2022 data, 48% of chiropractors offer patients payment plans; pre-payment plans are offered by 37%. Discounts for cash continue to be popular; our survey results showed that about 18% of DCs offer this type of payment plan, down from 28% in the 2021 survey.

<table>
<thead>
<tr>
<th>CODES AND FEES BY REGION</th>
<th>2022</th>
<th>EAST</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROFESSIONAL CARE</td>
<td>FEE</td>
<td>REIMB</td>
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<td>98940 CHIROPRACTIC MANIPULATIVE TREATMENT, 1-2 REGIONS</td>
<td>$52</td>
<td>$39</td>
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<tr>
<td>98941 CHIROPRACTIC MANIPULATIVE TREATMENT, 3-4 REGIONS</td>
<td>$63</td>
<td>$48</td>
</tr>
<tr>
<td>98942 CHIROPRACTIC MANIPULATIVE TREATMENT, 5 REGIONS</td>
<td>$71</td>
<td>$54</td>
</tr>
<tr>
<td>98943 EXTRA SPINAL MANIPULATION, ONE OR MORE REGIONS</td>
<td>$44</td>
<td>$29</td>
</tr>
<tr>
<td>99202 NEW PATIENT EVALUATION AND MANAGEMENT SERVICES</td>
<td>$85</td>
<td>$61</td>
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<td>$84</td>
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<td>99204 NEW PATIENT EVALUATION AND MANAGEMENT SERVICES</td>
<td>$164</td>
<td>$105</td>
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<tr>
<td>99212 ESTABLISHED PATIENT EVALUATION AND MANAGEMENT SERVICES</td>
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<tr>
<td>99214 ESTABLISHED PATIENT EVALUATION AND MANAGEMENT SERVICES</td>
<td>$107</td>
<td>$70</td>
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<td>PROCEDURES AND MODALITIES</td>
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<tr>
<td>97012 TRACTION, MECHANICAL</td>
<td>$34</td>
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<tr>
<td>97014 OR G0283 ELECTRICAL MUSCLE STIMULATION</td>
<td>$31</td>
<td>$17</td>
</tr>
<tr>
<td>97035 ULTRASOUND</td>
<td>$31</td>
<td>$18</td>
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<tr>
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<td>$30</td>
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<tr>
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<td>$24</td>
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<tr>
<td>97124 MASSAGE</td>
<td>$49</td>
<td>$31</td>
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<td>97140 MANUAL THERAPY</td>
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<td>97530 THERAPEUTIC ACTIVITIES</td>
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<tr>
<td>AVERAGES</td>
<td>$64</td>
<td>$38</td>
</tr>
</tbody>
</table>
REGIONAL FEE COMPARISONS

Across the nation, average fees and reimbursements among chiropractic practices continue to vary by region. The West and the Midwest reported the highest reimbursement rates in 2022 at 78% and 57%, respectively. The South followed close behind at 53%, trailed by the East at 49%.

Average overall fees ($64) remained the same, but overall reimbursements ($38) decreased this year, so the reimbursement rate dropped to 61% from last year's 69%.

The West reported the highest average fees: $69, down a bit from $72 last year.

<table>
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<th>%REIMB</th>
<th>FEES</th>
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<th>REIMB</th>
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<td>$42</td>
<td>75%</td>
<td>$51</td>
<td>$35</td>
<td>68%</td>
<td>$47</td>
<td>$32</td>
<td>68%</td>
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<tr>
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<td>$57</td>
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<td>$36</td>
<td>53%</td>
<td>$50</td>
<td>$31</td>
<td>57%</td>
</tr>
</tbody>
</table>
FEES AND REIMBURSEMENTS

From 2021-22 we observed that average fees remained the same, while reimbursements fell. Overall reimbursement rates dropped to 61% this year from 69% last year.

The last three years’ reimbursement rates have hovered between 64-70%; this year we saw the numbers remain among those averages, with the exception of the West, which led
Due to the fact that the Medray Dual and Medray Quad lasers are now two of the best selling Class IV lasers in the WORLD with hundreds and hundreds sold last year alone, Accuflex Lasers is running a very limited time SPECIAL sale. Once this group of lasers is sold, the sale ends—so purchase now and get the savings of a lifetime.

With this special, you can purchase the Medray Class IV Dual laser for $12,995 or the Medray Quad Class IV laser for $14,995, and receive the COMPLETE S.T.A.R. HANDS FREE SYSTEM FOR FREE! This is a savings of over $3,500. The Medray Dual is a two wavelength laser with 30w of power and the Medray Quad is four wavelengths with 27w of power. You can spend more, but you can’t spend better.

Call Dr. Gary Huddleston personally at 573-745-1086 or email him at drg4000@att.net. When this sale ends, this price goes away forever.

- Lease for as low as $245 per month
- 30w of power
- Fully editable parameters
- Complete $1,000 certification course
- All supplies included
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- Five year warranty, the best in the business
- The complete S.T.A.R. hands free system is FREE, a $3,500 savings
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Total Price of ONLY $12,995 with FREE S.T.A.R. System

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With much of the chaos of pandemic-related closures and restrictions behind us, the fall in most of the nation’s reimbursement rates suggests that dealing with coding and insurance continues to pose challenges for chiropractors and their staff. (The same doesn’t seem to hold true for MDs, whose reimbursements ticked up slightly this year — see the MD/DC code comparisons on page 26 for details.)
TEAM PLAY

Among our survey participants this year, slightly more than 24% reported operating in a group setting. This is a small increase from 2021, where 20% reported working in a group.

We had slightly fewer responses from associates this year, nearly 4%, and about 3% indicate they’re working as independent contractors in a practice. At 70%, slightly down from 2021’s 71%, DCs with solo practices made up the vast majority of our survey respondents in 2022.

Solo vs. Group Reimbursement Rates

Solo vs. Group Fees and Reimbursements

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Typically in this survey (with the exception of 2021), group practices report higher fees, reimbursements and reimbursement rates than solo operations. That held true this year; in 2022, group practices had average fees of $72 and reimbursements of $46, while solo practices had average fees and reimbursements of $63 and $40, respectively. Reimbursement rates were nearly identical: 63% for solo practices and 64% for groups.

Reimbursement rates in group practices increased slightly from last year’s 61% to 64% this year, while solo practices dropped from 73% to 63% over the same period.

Both types reported working with several kinds of specialists. The most common is a licensed massage therapist (39% of solo practices and 28% of groups).

The ebb and flow of reimbursements in the chiropractic field often mirrors what’s happening in the health care industry as a whole, albeit to a different or lesser extent. These parallels can be seen when evaluating the common codes shared by DCs and MDs alike, specifically the set of codes for the evaluation and management of new patients, including 99202, 99203 and 99204. (In 2020, code 99201 merged with 99202.)

In 2022, in a survey conducted by Medical Economics, a business journal for medical doctors, their data indicated that 50% of physicians thought their practice was doing “about the same” financially; in the previous year’s survey, 43% provided that response. Twenty-nine percent of doctors reported their practice was doing “worse than a year ago,” while 21% said their practice was faring “better than a year ago.”

In 2022, DCs (per this survey) and MDs (according to 2022 insurance company estimates, the latest figures available)
In spring 2022, our annual Salary & Expense Survey showed multidisciplinary and integrated practices achieving success, and increased salaries and reimbursement rates have followed. That said, chiropractors who have been in the industry longer have seen the larger paychecks that come with more experience.

Those salary survey participants with specialists working within their practice reported average total compensation of more than $176,000, compared to the $130,000 reported by strictly solo operations.

Multidisciplinary practices participating in this survey reported higher fees but lower reimbursement percentages than those without specialists.

Specifically, practices with specialists reported average fees and reimbursements of $72 and $46, while non-specialist practices reported average fees and reimbursements of $63 and $40, respectively.

Licensed massage therapists (LMT) remained the most popular practice add-on, with 23% having one on board. LMT was followed by acupuncturist (9%); fitness trainer (5%); physical therapist (4%); nurse or nurse practitioner (4%); and nutritionist (4%). Rounding out the total were MD or DO (3.5%); physician’s assistant (2%); and naturopath (close to 1%).

The breakdown of specific codes in 2022’s surveys is:

- For code 99202, MDs’ reimbursements were $81, and DCs reported an average of $61.
- For code 99203, MDs’ reimbursements averaged $124, while DCs’ reimbursements averaged $85.
- For code 99204, MDs reported a reimbursement average of $185, while chiropractors reported an average reimbursement of $106.
Although we saw an increase in survey participants reporting as franchises over the three years prior, we saw the percentage drop in 2019 to 5%, again in 2020 to less than 1%, and again in 2021 to 0.5%. This year 1% of our survey respondents identified their chiropractic business as a franchise.

The very small number of responses for the franchise category might seem to suggest that the popularity of franchise ownership is waning, but the increasing number of locations of chiropractic franchises such as NuSpine and The Joint suggests otherwise. It is impossible for us to tell definitively without a larger survey sample. For this reason, we are unable to draw any solid conclusions about chiropractic franchising from the results of this year’s Fees & Reimbursements survey.

The percentage of cash-only practice survey participants has hovered between 16-20% for the past few years, and that trend continues this year, with 17% reporting cash-based operations. Those DCs who did report a cash-based practice fared well in their collections. For cash-based practices, average fees were reported at $65, about the same amount as overall average fees. In 2019, cash fees came in at $61, then decreased to $60 in 2020 and perked up to $65 in 2022, so this year’s data serves as an indication that cash collections are up a bit from last year.

This year we asked what percentage of your collections is cash-based to dig deeper into this type of practice. About 34% answered that their practice had 25% or less cash income. Thirty percent had 26–50% cash, 12% had 51–75% cash, and...
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23% had 76–100% cash collections.

Your typical cash-only practice respondent is male (73%), with women making up 25% of this group (2% of respondents declined to report a specific gender). Of cash-based survey participants:

- 22% offer homeopathy;
- 19% offer nutrition;
- 17% offer kinesiology taping;
- 16% offer instrument assisted soft tissue mobilization;
- 14% offer exercise programs;
- 13% offer stim/ultrasound;
- 13% offer instrument adjusting;
- 13% offer electrotherapy;
- 12% offer laser therapy;
- 11% offer physical therapy;
- 8% offer massage therapy; and
- 5% offer acupuncture.

CHIROPRACTIC AND GENDER

Over the past few years the number of female survey respondents has hovered around one-quarter of all participants. This year, we saw an all-time high of 30.5%, up from 27% in 2021. The gender gap in the profession seems to be closing, albeit very slowly.

Female chiropractors reported slightly lower average fees than male DCs ($59 compared to $64), along with lower reimbursement averages ($35 to $41). Female practitioners also reported lower reimbursement rates than male DCs (59% to 64%).

The 64% reimbursement rate for men is down from 74% last year, and reimbursement rates for women are up a bit at 59%, compared to 58% last year.

Women respondents reported an average younger age (49.6), compared to men (54.2), which is approximately the
same as last year. In addition, female DCs reported being in practice for fewer years (21), while male respondents have been in practice for an average of 25 years.

Interestingly, both men and women reported offering the same top three modalities: nutrition (46%), instrument adjusting (44%), and ultrasound (44%) were the most popular. Rounding out the top five were cryotherapy/dry hydrotherapy (40%) and, in fifth place, electrotherapy (37%).

**COMPARISONS BY GENDER**

<table>
<thead>
<tr>
<th>PERSONAL</th>
<th>OVERVIEW</th>
<th>MALE (73.2%)</th>
<th>FEMALE (26.8%)</th>
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<td>11%</td>
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<td>CRYOTHERAPY/DRY HYDROTHERAPY</td>
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<td>FUNCTIONAL MEDICINE</td>
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<tr>
<td>NATUROPATH</td>
<td>1%</td>
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HOW PATIENTS PAY
The number of DCs offering payment plans to patients this year increased a bit (48% in 2022 compared to 45% in 2021). Historically in this survey, this percentage fluctuates up and down, but is always near 50%.

A significant number of chiropractors also offer discounts when patients pay in cash. This year 18% of DCs reported they have a discount-for-cash plan in place.

The remaining responses were “prepay” (37%), “down payment” (14%), “discount medical plan organization” (11%), “patient financing” (11%) and “other” (9%).

Interestingly, a final response choice, “negotiation per case,” came in at just over 20% last year — but came in at 0% this year.

Payment Options

Additional Codes

3 MORE CODES
Every year, we ask doctors of chiropractic to report on three additional codes: 95851 range-of-motion testing; 95831 muscle testing; and 97750 physical-performance evaluation. Average fees for range-of-motion testing were $28, while average reimbursements were $10 — a reimbursement rate of 36%.

Average fees for muscle testing were $36, with an average reimbursement of $18 — a reimbursement rate of 50%.

Average fees for physical-performance evaluation were $45, with an average reimbursement of $13, and a reimbursement rate of 29%.

ALLISON M. PAYNE is a freelance writer, editor and proofreader based in Northeast Florida. She can be reached at allisonmpaynewriter.com.
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WHETHER YOU'RE OPENING YOUR FIRST CHIROPRACTIC OFFICE, relocating your existing space or adding another location to your practice, securing a desirable site is often a complex and daunting process. The right location can help you grow awareness and patient acquisition. It can also influence the public's perception of your practice. And certainly, your rent obligation will be a major expense on your monthly profit and loss statement.

Lease terms often last 5-10 years, so the decision you make today can have long-term ramifications on your practice. How do you maximize the opportunity in the site selection process while avoiding the common missteps? In my role at The Joint Chiropractic, I have access to some of the best analytical tools and platforms in the industry, yet there are some basic rules of thumb that can help any chiropractor make the right decision. Here are four practical tips for your consideration:

Rule #1: Get some help!
Your team should include (1) a commercial real estate broker, and (2) a real estate attorney. The broker should know your desired trade area(s) along with present and future spaces available for lease. They should also understand local population growth patterns, the condition of the market and how to negotiate with landlords. As for the attorney, you will need them to review your lease and protect your interests, including rental rate increases and co-tenant obligations. Do not overlook the criticality of these roles.

At The Joint, we have a national network of brokers who understand our model and help our franchisees obtain desirable clinic spaces. We also contract with attorneys to review franchise leases. Our brokers and attorneys have longstanding relationships with landlords which help facilitate the negotiation process.

Rule #2: Understand your desired patient base.
This has as much to do with your personal preference for the type of practice you choose as it does with the composition of your local population. Naturally, if you want to target a particular type of patient — be they athletes, seniors or families — your site selection process needs to be guided accordingly. This may require locating your office in a trade area or city that best positions you with that specific population.

Publicly available information based on U.S. Census data can help inform that decision, and your broker should have access to demographic and possibly psychographic data. Demographics are measurable attributes of the population, such as median age, income, education level and language spoken. By contrast, psychographics measure behavior and lifestyle. An example of the difference can be seen in comparing two people of the same age and income, yet one spends their money on childcare while the other devotes theirs to playing sports.

At The Joint, we use our database of over one million unique patients to maintain a proprietary mathematical model that analyzes the demographic and psychographic profile of trade areas across the country. It helps us identify where we want to place our clinics in the future, and what our patients will look like before we open our doors.

Rule #3: Economic considerations matter.
Chiropractors generally locate their practices in two distinct environments: either a medical or office park setting, or a retail center. Both have advantages and disadvantages, especially in regard to how to run your practice. The primary reasons for choosing a medical or office park are lower rents, greater flexibility in office hours and a captive patient base that is visiting for their health care. Patient acquisition in a medical park environment may require additional marketing expenses, as foot traffic is relatively low.

On the other hand, the reasons for locating within a retail center include greater foot traffic, visibility to a wider population and the ability to drive walk-in visits. While retail centers attract more populations on a daily basis, those visitors expect businesses to be open during retail business hours. Many chiropractors maintain idiosyncratic office hours, which may present a negative image to a retail customer.
Rule #4: Choose your co-tenants wisely.
Your neighbors will help define the public’s perception of your practice, along with the reputation of your profession at-large. Locating in an office park amid other medical professionals may help establish the bona fides of your practice. By contrast, locating in a retail setting does not always offer the same credentials. The retail environment has been evolving for years and the pandemic has only accelerated those changes: weaker centers have become increasingly vacant, filled with less desirable co-tenants; while strong centers are able to still command higher rents and attract A-list concepts.

The Joint Chiropractic locates in top-tier retail centers that host other national brands, which aid in our mission of improving quality of life through routine and affordable chiropractic care. Our locational logic implies higher rents, but that added cost enables us to serve more patients in a convenient setting and helps promote the benefits of chiropractic care to a wider audience.

Chiropractors enjoy the freedom to locate in a wide variety of settings, but it is important to inform your site selection process based on the unique goals for your practice. Resist the urge to take shortcuts. Surround yourself with experienced real estate professionals who are looking out for your best interest. Do your homework on the data available for the centers and trade areas you are considering. The choice you make today will greatly impact your future success and peace of mind and enable you to focus your energies on building your practice and caring for your patients.

RICHARD MATTHEWS, PHD, has more than 17 years of experience in corporate real estate. As the director of real estate research at The Joint Chiropractic, he has helped open 400 The Joint clinics since 2014. He has an MA and a PhD in Economic Geography and has published articles in scholarly journals and a monograph on industrial productivity. He has presented original research on the location of business at meetings of the Association of American Geographers and the International Council of Shopping Centers.

Patrick Kolwaite, DC, multi-unit franchisee at The Joint Chiropractic, recognizes the importance of the right location for setting up a chiropractic office. His commercial broker had the “inside track” for a new retail site at one of Memphis’ most popular intersections.

“I had been looking for a third The Joint location and my broker, who had become a friend of mine over the years, knew of a highly-visible plot of land that was going under development,” Kolwaite said. “As a result, my broker was able to secure my next retail location for me before it was even available to the market, giving me a competitive advantage.”

According to Kolwaite, the East Memphis intersection of I-240 and Poplar Avenue is one of the busiest and was already anchored by a large retail center that included a Super Target.

“Visibility and the traffic patterns of a popular retail center made this site incredibly attractive,” Kolwaite said. “In addition, we were locating in a large commercial hub with corporate offices, where potential patients spend their days slumped at their desks. The site was perfect in supporting the patient base we knew we’d attract.”

By leveraging his commercial real estate broker, the retail center’s co-tenants, and his knowledge of the surrounding population, Kolwaite had the right muscle to open a successful chiropractic office. In fact, the opening of The Joint Chiropractic – East Memphis clinic in 2017 was one of the brand’s most successful, nationally, at that time.

“I had tremendous support from The Joint corporate office for this location and I followed the brand’s site selection model. Today, this chiropractic office is thriving and I’m looking for a nearby location to help balance the flow of patients. I’d say this growth demonstrates the success I’m seeing as a result of smart site selection,” Kolwaite added.

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For more information on careers visit thejoint.com/careers or message careers@thejoint.com.
How to Reactivate Your Ideal Patients

Mixing education and ‘infotainment’

By Naota Hashimoto, DC

Time to read: 9-11 min.

The Takeaway
Ideas to stay top of mind with patients and systems to stay in touch and minimize dropouts.

The Critical Part of a Successful Reactivation Campaign is to first identify the ideal patient types you want to reactivate. The problem with most offices is they attempt to reactivate 100% of the patients who quit coming to your office.

This sounds good in theory, but some patients do not value your service, some cannot pay for the service, or you may not be able to help certain patients. Automated reactivation campaigns have some success, but the best ones include more than three attempts to reach out to them with a message that will urge them to return to your office. Reaching out to them through different media (email, text, Facebook, phone call, direct mail, etc.) is even better.
Strong messaging and offers
I often see offices with lame messaging and offers with no reason to act. Think about your last dentist’s office you were a patient at; if they offered you a free examination, would you jump off the couch and pick up the phone to give them a call? The message would be ignored if things were OK with their current dentist. But they might respond if they were very unhappy with their current dentist’s office and it was time to check their teeth. However, a more robust offer from the old dentist’s office might entice the old patient to return, even if they weren’t upset with the current dentist’s office. Think about a free examination, X-rays and teeth whitening. Yes, that sounds like they are giving it away, but if you only sent this to your ideal patient, why wouldn’t you make it irresistible?

A strong offer without appropriate follow-up isn’t very successful. Think about an email or mail offer that you intended to take action on but forgot after you got busy. Your old patients are the same because good follow-up won’t double your response rate; it will usually be 10X your initial response rate. That’s why I also recommend multiple ways to respond, which I’ll mention later.

Don’t let patients forget
There are many reasons why patients quit coming to your practice, but the number one reason they stop is usually that they forgot about you. They didn’t have as much pain anymore and forgot to make a follow-up appointment.

Reasons why patients quit coming to your office:

1. They forgot about you;
2. They found a new resource/solution to their problem.
   This could be another chiropractor, but it could be massage, physical therapy, injections, surgery, medications, an inversion table, supplements, home therapy products, etc.;
3. Lousy product (you were not getting them better);
4. Lousy service (your staff or outside billing company offended them);
5. Moved away;
6. Price (or lack of insurance coverage).

Most think that price is the number one reason, but the main reason is they forgot. Aside from reason number five, the others can be improved upon. For the price, it’s rarely about price; it’s about the perceived value of your treatment and finding the patients who have value for your service.

Lousy service can be fixed by having service-oriented, empathetic people who are well-trained. If you hire the right people and have good people around them with great systems, it’s easy to offer good service. A lousy product can be improved by accurate diagnosis and improved treatment protocols. You don’t have to be a one-stop shop for everything, and if you do not offer exercises to improve function, maybe you can find providers in your area that you can refer to, and they will probably refer back.

For example, if your patient requires a lumbar facet ablation, consider referring them out for that; back when I was busy in practice, I would get several referrals a month from medical providers. Many of them did not understand what an excellent referral to me was, so I taught them. I also asked them what
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FOR YOUR PATIENTS

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LONG LASTING

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*Based on a survey of chiropractors, osteopaths, massage therapists, physical therapists, retail pharmacists, and athletic trainers (IPROS Opinion Survey).

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types of cases they wanted as referrals. I understood that I couldn’t fix everything. The pain management doctor educated me about procedures they offered, and I educated their staff about chiropractic. I actually treated many of their administrative staff and received many referrals from their front desk administrator over the years. The point of this is that by doing what was best for the patient, they stayed, paid and continued referring, and I gained more referrals by co-treating with other types of providers.

How do you prevent patients from forgetting about you? My favorite method is a monthly recurring membership for patients who have finished my care plans. It increases the value of your business if you were to sell it, and those patients are the most straightforward and appreciative in your practice. In addition, they are likely your advocates in your community and will refer more than other patients. I like to send weekly or at least monthly emails with the information they care about, but I always add my personality to every piece of content.

Education and ‘infotainment’
Most think it’s all about education, but you must mix in “infotainment” (information and entertainment) with your patients.

Share relevant stories about yourself and what you’re doing personally to improve your health. For example, share a healthy smoothie and why drinking one is important. It doesn’t have to be all about chiropractic; some of them could be informative with home exercises for shoulder or neck pain. You can send them a birthday card, email or text. You could have a patient appreciation event.

Ideally, you have done a great job clinically with excellent customer service. You have stayed in touch with patients to minimize the dropouts, but just in case people drop out, here’s what you have to consider when sending your messages.

1. Identify who has become inactive;
2. Remove patients who are not ideal (out of the area, inability to pay, inability to help, rude, etc.);
3. Create a campaign theme and the reason why you are reaching out (i.e., they haven’t been in lately). It could be an evergreen without a monthly theme, but if you could tie it into the month, a personal event, or a funny reason, you’ll get a better result. For example, if it’s in September, it could be a “fall back into health” theme, October could be a Halloween theme, and November could be about giving thanks to all your patients;
4. Have a deadline; nothing happens without a deadline.

Once you determine when this offer ends, you can choose your campaign’s start date;
5. Have a compliant offer; this is what you’re offering the old patient for returning to your office. Lame offers get lame responses; my mentor always told me you should be uncomfortable with the offer if it’s a good one. But, again, segmenting your list is crucial because you only offer this to your ideal patients. You’re not offering this to an old out-of-network patient who received your insurance checks and never returned them;
6. Create the content: postcards, letters, emails, text messages, phone scripts, etc.;
7. Send out the campaign and follow up with phone calls.

This sounds like work, and I’d be lying if it wasn’t, but once you’ve created one of these, you can re-use it year after year. It’s worth the effort because you’ll get a better response rate and fill your practice with better patients. Segmenting is also vital if you’re calling and/or mailing these people because it will reduce your mailing costs and labor costs with the follow-up.

Reactivation campaigns
If you’re looking for some content ideas, I wrote up a generic reactivation campaign you could use in any month of the year about preventative care. This could be sent via email and text, but I recommend adding phone calls to this campaign. Any time you can add another touchpoint, it is ideal, but this is an easy one. See below for details. CE

NAOTA HASHIMOTO, DC, is the co-founder of TrackStat, which is patient tracking software making it easy for administrative people to attract and convert new patients while ensuring your existing patients stay in your practice. It offers new ways to retain patients and also offers ways for staff to communicate and schedule patients while providing you all the metrics of success. Please visit trackstat.org/reactivation if you want to download a free template to reactivate your patients.
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THE TAKEAWAY
How elements of the patient conversation, utilizing X-rays and foot function education all work together to create patients who take ownership of their health.

EVERY DAY, WE EACH HAVE THE CHANCE TO SHOW AND TELL THE CHIROPRACTIC STORY, and we get to choose which words to say, who to tell, when to adjust and what technique to use. We are so independent that by the time we are done, it’s usually the [insert your name] technique.

This formula is one of the best parts of the profession as it allows so many individuals to thrive and reach just the right audience. One feature we all have in common is movement, whether describing deficiencies found on examination or contemplating the correction.

The same string — movement — can be used to keep patients on track as they learn about the relationship of their spine to the rest of their body. However, just like our nuances as doctors, the patient experience can vary. They may hear us differently from what we intend and require multiple methods of learning to grasp subluxation concepts. It’s like the adjustment, which is hard to understand until you’ve experienced it.

One of the things we can do in the patient onboarding process is to make the education interactive, which gives patients a better chance to taste and digest this new perspective.
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Elements of the patient conversation

These days, patients crave a conversation with someone who can connect seemingly random health dots and provide relevance to their situation.

This eagerness creates an opportunity to partner with them toward better compliance and results. When they arrive in your office, they have to learn a new lingo and dare to consider care of asymptomatic regions. The leaps they need to make can be intimidating and an immediate roadblock to care, unless the experience is grounded to a solid education.

Patients want information that’s specific to them, and you can provide perspectives they can’t get anywhere else. It sounds like the perfect match, but the key is how information is handled. Do you lean on fear and the cold reality of their health status, or can you trust patients to make good decisions in the absence of urgency? I’ve always believed we can do more when we empower patients with the right information versus leaving them feeling forced to decide between care and certain failure. This is why I go all-in on the report of findings and ask the patient from the start to be an active participant.

Being in the field of prevention (the health standard, not alternative) we may lack some urgency, technology, and overall seriousness that the traditional health care system has offered through their formal process and advanced diagnostics. As health care enthusiasts, we may appreciate it as well, but to not give someone a basic one-on-one understanding of their body and use that same technology to give them easy-to-follow health indicators and a personal health compass is a missed chance to prevent decline.

Building X-rays into the patient experience

Let’s start with X-ray review. I understand there is a debate about when and why to X-ray.

For the patient experience, I believe what can be learned about the body from reviewing X-rays with a chiropractor is an opportunity that’s too good to pass up. The images can provoke a dialogue and provide a reference point that a doctor can directly connect to the adjustment(s). Among the many clinical benefits, the chiropractor can share our unique perspective while satisfying the patient’s desire for more self-relevant information.

When a patient views their X-rays alone, it’s hard to see what’s wrong until we put them side by side with normal X-rays. Then, in an instant, all the line drawing in the world can’t compare to what a patient can see with their own eyes. In my office, this process of visual learning is even more interactive with colorized digital foot scans. Here, we build on the imaging model and literally walk patients through the biomechanical chain toward some basic conclusions about their alignment and whole-body posture.

One of the more critical steps in this area is discussing how over-pronated feet relate to posture, anterior head carriage, and other misalignment patterns that compromise movement and may have been hard to see on X-rays alone. With weight-bearing X-ray and foot scans, we can relate the spine to their body, from top to bottom.

With this combination of advanced imaging and education, it’s possible for patients to conclude that “the whole body is connected,” and “here is a domino effect that one area has on another.” They can see it and touch it — it’s an interactive experience, and it really helps synthesize the material.

So, in my office, when patients know I’ll be checking their feet for possible adjustment after I’ve checked their spine — when they’ve seen, felt and experienced their biology (their feet) in this way — they come in ready. Patients know to take their shoes off every visit; they expect that I’m going to check for compliance (are they wearing their custom orthotics?); and they know I may need to work on their feet to protect their spine and hold the adjustment better.
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The element of foot function
“Foot function” is one example of relating the spine to the whole body. There is great potential (for patients) in understanding how we can use every inch of our structure to build quality movement on a foundation of neutral posture and good balance. From here, we can connect to movement-related meta functions such as metabolism, breathing and blood flow. These highly accepted stalwarts of good health can aid in motivating patients to comply with chiropractic-guided rehab that pays special attention to protecting and strengthening the spine. Helping patients firm-up their commitment to spine-savvy exercise and regular use of custom orthotics that support all three arches of the foot to stabilize the body can lead to a lifetime of wellness.

When a patient comes to understand any of these spine-health indicators (alignment, ROM) it gives them a beacon to come back to, like having their own North Star. Just remember, conversations alone about movement and the spine can be a little flat, especially when sitting in a doctor’s office. Patients can thrive when we take a proactive approach to patient education based on interaction. The goal is for them to take ownership of the information, which sets the tone for a healthy attitude and behavior that matches. When they can speak the language, they are more likely to understand the value of the work and follow recommended lifestyle changes.

Stay tuned for Movement 2.0 next issue, where we expand on spine-related functions and how to create more win-wins in home care that support your budding partnership with patients. CE

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THE TAKEAWAY
While first impressions are important, are you leaving patients with an intentional, authentic last impression that conveys more than just words?

THE BUSINESS SIDE OF HEALTH CARE requires that we do far more than deliver a service or product. Modern consumers expect and deserve a positive experience. That impression begins with the first impression — whether that means contact with your website, phone or in-person first contact; but might a focus on the first impression miss key elements of the patient experience?

The last impression
Successful doctors intentionally engineer not only the first experience, but also the central in-office experience and key deliverable (typically an adjustment, in the chiropractic setting). But what about last impressions, the impression patients take away as we end the day’s interaction?

How can we ensure we have all three legs of the experience stool (first impression, central experience, last impression) solidly supporting our practice and (more importantly) the patients we serve?

Experiences require people, not just systems living in a manual. In our office, we have a system to identify and hire people who are “Welcomers.” These people are wired for connection, service and empathy — aspects of the...
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patient experience that are all-too-often overlooked. Once we've vetted and hired these applicants we onboard them, immersing them in a culture that we've clearly defined and that we all buy into. We all know our vision, mission, values, code of honor, “We Believe” statements, and live under an accountability system (“Accountability Ladder”). And we make them a part of how we behave so that the principles are observable by the patient, even if those same patients don't fully understand why they love their experience here. The systems are executed by a team of exceptional people who bring operational theories to flourishing life.

When the last impression goes wrong
Our team has systems for creating positive and memorable first impressions, as well as for the core patient experience. Those systems are beyond the scope of this article. Instead, let's focus on an oft-overlooked element of patient (customer) experiences: the last impression.

Imagine you're on a first date. Your date's clothing and appearance are appealing, showing attention to detail and good taste. They make eye contact, smile and instantly forge a connection. The first impression has been made — but discussing the second date is premature. The main experience is why you are both here ... and it goes well. Your date is polite, engaging, funny, smart, and just seems to get you. The interactions are stimulating and authentic, never forced. The meal is over way too soon, and it's time to go. But wait! How do we part ways?

If the parting is a fond and mutual, “Hey, this was really special, we should do this again sometime, Sara!” followed by a warm and appropriate embrace, that might be the perfect end to the evening. But what if after that perfect evening you exit the restaurant and part with an awkward handshake and you're both lost in your phone before you're even out of sight with each other? Or your date drops a pack of cigarettes (and you don't smoke)? That leave-behind, that last impression, is as indelible as the first. Just like that, despite that amazing first impression and date ... there's a sense that something's not right, not safe and welcoming, and just not you. That last impression matters.

Setting an intentional last impression
How can we set the "last impression" for our patients? Of course, if the first impression gets botched and the experience is subpar, it won't matter how amazing your last impression is. But let's say you've got your team and your systems dialed in, and the patient and you are about to part ways for the day. Now what?

For the doctor, the last impression needs to be intentional. Douglas Sea, DC, teaches that ending the patient encounter needs to be by the patient’s permission. “Anything else I can check for you?” is one way to get that permission. It’s a little thing that respects the patient and differentiates the encounter from so many others. Once the patient has given permission to end the encounter — and only then — the doctor moves on, with the patient feeling valued and their time respected.

“Names are the sweetest and most important sound in any language,” said Dale Carnegie, and that’s good practice in greetings, during the “meat” of interactions ... as well as in parting. “Daniel, we look forward to seeing you on Wednesday!” is a great way to part with a patient — but avoid the trap of using the words only! The words we speak are only roughly 7% of the message we convey. The vast majority of communication is non-verbal, human behaviors like tone and pace and eye contact and body language.

Our brain sounds an alarm when it receives conflicting information, a state called “cognitive dissonance.” An example of cognitive dissonance is that feeling we get in our gut when someone says “Have a nice day” but their tone and body language declare, “I don’t care; my boss makes me say that.” Aligning the words we speak with our observable behavior, and even with our hearts, creates an authentic, connective and positive experience and “leave-behind” (almost like a delightful aftertaste or bouquet in wine) for the patient ... and for the person doing the parting. I once had an acupuncture instructor counsel, “Doctor, you are treating the patient. The patient is also
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Behavioral styles that benefit business

Many organizations and businesses benefit from studying behavioral styles such as DISC (based on the writings of a Harvard psychologist).5

“Behavioral styles” is a fancy way of saying that people are not all the same. Some people intensely desire harmony and human connection, while others place higher value on efficiency or outcomes. Some value a faster pace, while others will feel rushed at that same pace. Some love change, others prefer stability.

Learn to identify others’ needs, then execute on the Platinum Rule: doing unto others as they want to be “done to.” To quote Dale Carnegie:6 “Personally I am very fond of strawberries and cream, but I have found that for some strange reason, fish prefer worms. So, when I went fishing, I didn’t think about what I wanted. I thought about what they wanted. I didn’t bait the hook with strawberries and cream. Rather, I dangled a worm or grasshopper in front of the fish and said: ‘Wouldn’t you like to have that?’ Why not use the same common sense when fishing for people?” This is wise, timeless advice for fishermen — as well as doctors and their teams.

Find your authentic last impression

How else can you create positive last impressions? Handing you a script or playbook to answer that question would be cheating at best, counterproductive at worst. The best robot isn’t as good as a caring, attentive human listener.

Giving you “the answers” risks training you to deliver words or actions tainted by hints of cognitive dissonance for you (or your team member) and the patient, both. I’d advise being intentional, authentic, and leading with your heart. A footrace isn’t over until it’s over, and coaches counsel runners to run through the finish line to avoid letting up too soon and spoiling an otherwise solid performance.

In the same way, when a patient is in the office, don’t let up on your “performance” until the “race” is over. Last impressions matter and can never be undone. Design and close each encounter properly, and the end results for the practice and the people you serve will be magical.

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References can be found online at chiroeco.com
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THE TAKEAWAY
There's a fine line between smart utilization of patient data and a HIPAA violation, but using data is arguably the most powerful way to strike marketing gold for your practice.

HOW CAN A CHIROPRACTOR TRANSFER PRIVATE PATIENT INFORMATION ONTO PUBLIC PLATFORMS while reaping all the benefits and none of the pitfalls?

When ethically and responsibly leveraged, patient data can become a mutually beneficial resource that can lead to improving the lives of future chiropractic clients and helping your practice thrive financially. Striking gold on the marketing front requires more than advertising smarts, however. It also takes savvy navigation of the regulatory landscape to avoid exploiting the patient-practitioner relationship.

Segmentation data to be mined
There is a lot of data that can be mined from your EHR (electronic health record) system:
• When are patients dropping out of care?
• What is the percentage of new patients who still return to the practice a year later?
How to INCREASE collections

Everywhere you look, there is someone telling you how to do _______ with your practice! Marketing 'gurus', the guaranteed X amount of New Patients guy, modalities, etc. Ultimately the most valuable time, is YOUR time. Time is the most valuable currency, so how do you get more of it?? As you already know, the truth is, you don't more time. But, by hiring and training the right pieces for your office, you can delegate tasks and such and free up your time.

If you are reading this then you likely own your own business already and understand the struggle that come with even the best of employees. They get sick, their kids get sick, car troubles, etc. I have an incredible staff and these things still happen. These things can be managed in order for this office to stay functioning, but the thing that can't slack, is your billing. It's how we get paid! Yes, I know cash collections are also how we get paid and I am 65% cash collection in my office, but those are the easy collections.

Insurance is where things get difficult. All of the different errors and things that can be missed when billing in your office, can set you back on collections, cost you more money or risk even collecting that money. The money must never be affected. Not to mention the ever-looming scare that comes with insurance, audits. The biggest issue I see with that is Doctors saying that they 'didn't know.' I feel that with Physician Services I do not have to worry because of their knowledge.

So, how do you collect more money? By hiring a billing service that is top of the line. You cannot grow, until you are ready to grow. You want to see more and collect more, but you are behind on billing……good luck. You cannot collect more money, until the errors in your practice are fixed. It is tough to sit back and be honest with ourselves and admit that we could have an error somewhere in our office and have to make the change to fix it. But, to improve, it must be done.

This is why I love using Physician Services. I have used them for almost 4 years now and I have friends that have been using them for 10+ years. I hired them six months after opening and wouldn’t hire anyone else to do the job. They have teams of billers that are extremely knowledgeable about chiropractic billing specifically. Shelly and her team have been our billers since the day we started and it makes practicing and running a business much easier. I have seen other billing companies that are not chiro specific and it can be a disaster.

My billing never gets missed. If someone is out of town or sick, my billing still gets done. They handle the EOBs, posting, appeals, even helping with credentialing. The billers always have insight into certain insurance policies that help save money and speed up billing.

They never miss any modifiers. They catch any mistakes that slip through the cracks with accidental SALTed charges. We have a weekly call with Shelly and her team to review any small issues, but normally there aren't more than 2-3 small things to even touch on because they are always on the ball.

Customer service is a big part of business and in today's world, in my opinion, it is falling off. Physician Services is the gold standard when it comes to customer service. If you ever have any questions or issues, they are always a quick email or call away.

In my second full year of opening Limitless Chiropractic, we collected upwards of $1 million. I was the only Doctor in the office seeing 400-450 per week, and no not a lot of therapies either. One of the main reasons that we were able to grow at such a rapid rate, was because we were able to hand off all billing to Physician Services and strictly focus on customer service, patient care, and employee training and growth.

If you bill insurance in your office, then you need to give Physician Services a shot. You will NOT regret it!!

Jason O'Rear, D.C.

Call me to hear more about my experience with Physicians Services! Jason O’Rear, D.C. 985.888.6200

Call Greg Barnes at 1-800-208-1009 or 954-495-6845 to increase collections today.
According to a study by Medicare Advantage, the average visit with a doctor is only 17 minutes — and 44% of those surveyed hadn’t visited their physicians in the past year, and even further, 13% in the past five years. This means patients aren’t finding enough value in their visits as an incentive to follow through with appointments — and health care providers are turning to big data analytics for answers (Evōk Advertising, 2020). Where is the breakdown in communication and what opportunities are being missed in your practice?

Today’s health care consumers are about personalization. They don’t want to be treated like everyone else. When it comes to patient emails and promotions, a single man who plays golf on the weekends is not interested in the benefits of prenatal care in your practice. It is important that all your marketing is segmented to appeal to the needs and wants of your patients.

What about compliance?

There’s a fine line between smart utilization of patient data and a HIPAA violation. The first step is getting patients’ consent to use their private health information. The next is knowing what does, and does not, constitute marketing to previous, present and potential patients.

This hinges on understanding HIPAA’s Privacy Rule, which is especially important if you’re thinking about involving a third party in your marketing efforts. It’s highly recommended that you create a HIPAA Business Associate Agreement (BAA) when using an outside business for promotions. With these key considerations understood, you can take more confident steps toward marketing (HHS, 2003).

Emails can be sent to existing patients only when HIPAA’s email-specific rules have also been met. This will allow a clinic to safely promote goods or services related to the patient’s current treatment, as well as other goods or services which may potentially be of interest from outside parties (HIPAA Journal, 2022).
Using data to craft testimonials is another — and arguably the most powerful — way to strike marketing gold. Potential patients often trust previous/current patients more than they do any doctor, nurse or advertisement. Receiving a recommendation from family, friends or even a stranger can carry greater weight in deciding where they spend their money.

According to Marketing Charts, personal recommendations and third-party reviews top the list of trusted sources while traditional advertising flounders in last place (Marketing Charts, 2020). Again, it’s essential to ask a patient’s permission to use their name, likeness or any other detail which could personally identify them and reveal details about their private life or medical status. This will help you avoid regulatory fines and legal trouble, particularly the potential for advertising injury (IRMI, n.d.).

If permission is granted, a chiropractor could then spotlight that patient’s story using multiple media such as blogs, videos, social platforms or a podcast. This communicates in very human, and proven marketable terms, the kind of work a clinic does and the sort of positive results they can achieve.

Let patient data lead the way
Your perceived usefulness as a practitioner could depend greatly on well-integrated social-based advertising using patient data that promotes the public to the public, rather than solely promoting you and your service (Big Commerce, n.d.). Following HIPAA rules in every instance can make your marketing as worry-free as it is effective.

RAY FOXWORTH, DC, FICC, is a certified medical compliance specialist and president of ChiroHealthUSA. He has served as president of the Mississippi Chiropractic Association, is a former staff chiropractor at the G.V. Sonny Montgomery VA Medical Center and is a Fellow of the International College of Chiropractic. He can be contacted at chirohealthusa.com.

References can be found online at chiroeco.com
MARKETING MATTERS

PATIENT EDUCATION IS A NEVER-ENDING PROCESS. Your responsibility for patient education begins as a “grassroots” effort. You can’t begin to compete with the billion-dollar advertising budgets of drug companies.

To top it off, the health paradigm you teach is virtually unknown to the majority of patients. Yet with practice, you can polish your tableside patient education skills to increase both patient referrals and retention.

Timing is key
Be aware of the “Deer in Headlights Syndrome.” This is when you provide patients with information at the rate of water flowing out of a fire hose.

They have no other response than to sit there in incomprehension as it washes over them. Take note of where the patient is in their plan of care and which information is appropriate for them. Giving too much information too soon will cause your rapport with the patient to break down and may result in them dropping out of care prematurely.

Avoid complex and overly wordy dialogue. Practice making your point in 1-2 minutes. Learn to read patients’ body language, especially their facial clues, for receptiveness.

Who are your patients?
When asked, most chiropractors and chiropractic practice team members report that they entered the profession to help people. It’s important to be curious about your patients, their lives and what motivates them.

Ask about their likes and dislikes. Ask about their family, children, significant other and friends. Ask about their job and any physical or emotional stress related to their employment. Ask about their hobbies, their car, movies they like, what they like to wear, where they eat … and tie it in to chiropractic! Connect the dots for patients. Let them know how chiropractic care can improve the quality of their life in the areas most important to them.

THE TAKEAWAY
Patient education can be an overwhelming amount of information. Use these tips to deliver succinct messages, bond more efficiently, and convey your services or products with messages that lend to your marketing efforts.

TABLE TALK
How to use tableside patient education to increase referrals and retention

BY MARK SANNA, DC, ACRB LEVEL II, FICC
TIME TO READ: 5-7 MIN.
Hey Doc,

Erchonia’s 25-year partnership with Chiropractors has given us the ability to educate thousands of people on the importance of Chiropractic Care and Low-Level Laser Therapy. Thanks to you, we have over 10,000 hours of educational classes, clinical studies, and absolutely miraculous laser application results.

This partnership has truly made Erchonia the world leader in laser therapy and put us in a position to expand the use of laser therapy worldwide.

We wanted to thank everyone who has continually supported us and our mission to change the healthcare industry and minimize the need for prescription drugs and invasive procedures. We have come a very long way and are excited to see what the future has in store for laser therapy.

I want to invite you to our biggest educational event ever. This event will take place Nov 3rd –5th in Orlando, Fl. This event will have a 12-hour seminar including CEs, an 8-hour medical session, a cocktail party to celebrate our special release during the event, and a golf tournament to enjoy a day with our doctors, speakers, and partners that made all of this possible.

Please join us and continue to be a part of the technology and the team changing the healthcare industry.

Best Regards,
Steve Shanks.

Steve Shanks
President of Erchonia

Call us to register: (844) 960-7246
Let patients know who you are
When a patient accepts your recommendations for care, they are entering into what could be a lifelong relationship. Let your patients get to know you as a multi-dimensional human being. Place family photos in treatment and reception rooms. Tell patients about how and why you became a chiropractor. Let them know about how you adjust your children and that you get adjusted too.

By the way, when was the last time you as a DC were adjusted? Do you take the nutritional supplements you recommend to your patients? Do you wear the foot orthotics you recommend? Be sure you walk your talk.

Questions, questions, questions
The best way to start table talk is by asking a question. Take time to practice asking questions. What is it that you wish to accomplish:

• Stimulating a new thought process?
• Establishing a new health habit?
• Generating a patient referral?

Remember that people are primarily visual. Support your communication with educational posters and brochures. Digital messaging units can be programmed to prime patients with questions while they are sitting in your reception room.
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Asking a question interrupts people’s thought pattern. Give people a chance to think about their response before you provide them with the answer you are anticipating. Great questions produce great answers. A powerful question is, “In 5-10-15 years, what will your health be like if you don’t change a thing?” Ask, “How is your parents’ health? Would you be happy ending up like them?”

Listen closely to their answers and share your knowledge of how chiropractic can make a positive difference in their life and the lives of their loved ones.

Use questions to ask for referrals
Asking every patient for a referral is by far the most effective, least costly way to build your chiropractic practice.

The most potent practice-building tool is your one-minute message to your existing patients. Thoughtfully designed and pre-scripted, the message describes an additional service you provide or condition you treat. The message benefits not only your patients, but their friends and family as well. It’s how you turn your present base into recruiters.

Sample one-minute message
“Something happened the other day that I wanted to share with you. A patient came in and told me she had suffered from headaches for five years. She’d gone to three doctors without results and had become convinced she was incurable. Well, I told her one of my fortes was helping headaches and, in fact, within about three weeks her headaches were gone.

“So, I want to tell all my patients that if they know someone who suffers from headaches to tell them they don’t have to because there is help. Headaches are terrible things, and these people can be helped. Would you do that for me, please?”

Practice makes perfect. Make a list of services, conditions or products you’d like to promote. Write a 30- to 60-second script for each. Practice by repeating them into a tape recorder or video camera until they flow easily. Once polished, post these referral-generating videos on your social media channels for additional impact. In no time, you will become a master at the art of patient education and referral creation.

MARK SANNA, DC, ACRB Level II, FICC, is a member of the Chiropractic Summit and a board member of the Foundation for Chiropractic Progress. He is the CEO of Breakthrough Coaching and can be reached at mybreakthrough.com or 800-723-8423.
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DOES YOUR WEBSITE E-A-T THE COMPETITION?
Check your website for these five must-haves for clinical success

BY BILL ESTEB
TIME TO READ: 8-10 MIN.

THE TAKEAWAY
Simply checking the box “have website” isn’t enough. Check if your website meets these must-haves for practice growth.

IF YOU WANT TO EXCEL ONLINE, you’ll want to see your website from two perspectives. Does your practice website delight prospective new patients? Does it address their concerns better than a competitor’s website? Does it supply sufficient trust signals to reassure Google?

Without turning you into a webmaster, here are five website must-haves for your chiropractic practice. Deploy these strategies if you want to maximize growth and attract more potential patients.

Must-Have #1: Mobile-first design
These days, designers are adjusting to the idea of mobile-first design because more than 60% of website visits are on mobile devices.

What does mobile-first design mean? Be mindful of the most important elements:

- **Responsive Design** — Your website needs to sense the screen size of the visitor and automatically adapt. Visitors don’t want to scroll left to right on a mobile device.
- **Fast Loading Time** — How quickly your website loads is a ranking factor with Google. Long loading times can negatively impact your visibility in search results.
- **Simple Navigation** — The user experience is increasingly important — and difficult when you’re working with very little real estate. Helping visitors find what they want must be easy and intuitive.
- **Legible Font Size** — Besides conforming to the visitor’s screen size, the design must offer up text that is 12-point or larger for readability.
- **Tap Target Spacing** — Do clickable words and buttons have sufficient spacing to avoid unintentional responses?
- **A Working Call Button** — Naturally, whenever your phone number is displayed, clicking on it should initiate a phone call.
2022 CONVENTION HIGHLIGHTS

CHIROTHON
The first ever chiropractic ‘telethon’ hosted by the Foundation for Chiropractic Progress was a huge success! The historical event joined thousands of consumers and chiropractors nationwide on 12 media channels, donating to enhance the awareness and benefits of chiropractic care!

OPENING SESSION: MINDSET
Tony Robbins speaker Bill Storm kicked off the entire event with a Peak Performance Workshop focused on mindset.

PEOPLE CAME TO SHOP CHIROPRACTIC

8 CHIROPRACTIC COLLEGES IN ATTENDANCE
Alumni Connection was BACK! Luncheons and Receptions were hopping all weekend long.

50 YEARS OF SERVICE
Debbie Brown-Hagan was joined by colleagues to celebrate her retirement after 50 years of service to FCA.

“THE BEST lecture I have heard in many years. Dr. Sportelli is a legend. This recording should definitely be sent to every Chiro College for all students to hear. This is an INCREDIBLE analysis of our profession.”
A mobile-friendly design requires thoughtful discipline, creative design and lightweight programming so your website produces an optimal user experience.

**Must-Have #2: Demonstrate E-A-T and Y.M.Y.L.**

Formally announced in 2019, Google added two refinements to their search algorithm that directly affect chiropractors.

Y.M.Y.L., which stands for Your Money or Your Life, refers to websites that provide information that could “potentially impact the future happiness, health or wealth of users.” These include sites that offer financial advice or health care information, like yours. Such websites receive extra scrutiny. Google has a 160-page set of written guidelines to help actual humans rate the veracity of the information using E-A-T: Expertise, Authoritativeness and Trust:

**Expertise** — Make sure your website describes your educational achievements and details any special training you’ve received, such as advanced studies or certifications that make you an expert in your field. Don’t overlook your annual continuing education. Do you have high levels of success with certain types of cases? Or a special protocol? Provide proof you’re an expert.

**Authoritativeness** — A related criterion is presenting yourself as a knowledgeable, reliable and consistent authority. This is where you might include the number of years in practice, the number of adjustments delivered, or perhaps even how many patients you’ve helped. Believable testimonials and relevant case studies can help make your case. This isn’t about boasting but rather substantiating your credentials and being seen as a leader.

**Trust** — This is the essential quality that patients, as well as Google’s quality raters, are looking for. Naturally, offer proof whenever possible for any claims you make. Use outbound trust links to corroborate the information you offer, such as technique websites, your chiropractic college, or other sites that are well-recognized authorities.

**Must-Have #3: Reviews**

This is an obvious must-have, since reviews are a form of social proof often trusted as much as a referral from a friend. Be sure to claim your listing with Yelp and other review sites. The key is to have a consistent flow of reviews. Slow and steady wins the race. That means using a systematic approach so you’re always getting fresh reviews.

Naturally, don’t solicit reviews from non-patients or offer prizes or compensation. And while you may have to teach patients how to leave a review, never provide a computer in your office for such a purpose.

**Must-Have #4: Local SEO**

Search Engine Optimization (SEO) for a local business is quite different than it is for a national company or recognized brand.

Start by claiming your Google Business Profile. This profile may even be more important than having a website. Complete the listing, confirm your practice location, upload your logo, and supply your practice hours, photos and other details to fully complete your listing.

The other local SEO strategy is to obtain high-quality, relevant links back to your website.

Think of each link from a radiology group, attorney or local allied health care provider as a “vote” that verifies your trustworthiness. The objective is to reassure Google that it should risk its reputation on yours.
Must-Have #5: Conversion
If your website is going to be an effective marketing tool for your practice, it’s important that it converts visitors into new patients. Simply checking the box “have website” isn't enough. Here are some of the most important elements of high-converting websites:

**Know Your Audience** — Simply put, your website isn’t for you. It needs to create an emotional connection with your conception of an ideal patient. Trying to be all things to all people is a recipe for obscurity.

**Practice Accessibility** — Also, be mindful of the large percentage of people who have low vision and other disabilities. Incorporate proper contrast ratios between the text and backgrounds to make your content accessible.

**Don’t Make Me Think** — Use well-accepted conventions, such as placing your logo in the upper left corner with a link to your home page. Place your contact page in the upper right corner. Use contrasting colors for linkable text.

**Answer a New Patient’s Questions** — Anticipate what a new patient would want to know. That includes those who have been to chiropractors before. Ask your front desk chiropractic assistant the most common questions new patients ask. Then, make sure those questions are answered on your website.

**Make It Browsable** — Make the text easy to scan. Large blocks of gray text are an invitation to skip to something more easily accessible. Use short sentences. Be mindful of multi-syllable words that can make reading more difficult. The rule of thumb is to aim for website text written at an eighth-grade reading level. Use short paragraphs, subheadings, pull quotes and other techniques to help visitors find what they're looking for.

**Call to Action** — Make sure there is a suggested action on every page. What do you want the visitor to do next? Learn more about what to expect on the first visit? Schedule an appointment? Subscribe to your newsletter? Read patient testimonials? Lead the visitor.

**Use Photography** — One of the most powerful conversion elements is custom photography. Be sure to show “people” over “things.” And avoid the “neutron bomb effect.” Empty reception rooms and empty adjusting tables may work for a spread in Architectural Digest but not on a practice website.

These five website must-haves have changed over the years as the internet has evolved and matured. They are likely to change again in the future. Keeping up with new trends in website design is a full-time job. It requires a trusted digital marketing partner who can provide leadership, trusted advice and continual updates.

BILL ESTEB is the co-founder of the Perfect Patients website service. Since 2006 this team of digital marketing experts (who love chiropractic) have been helping practices around the world get and keep more new patients. Learn more at PerfectPatients.com.
TREATING INSULIN INSENSITIVITY
Pick the low-hanging fruit to get started with functional medicine

BY PAUL VARNAS, DC, DACBN
TIME TO READ: 9-11 MIN.

THE TAKEAWAY
Ease into functional medicine by using diet and supplementation to treat what ails more than half your patients: insulin resistance, insulin insensitivity and Type 2 diabetes.

THE BEST WAY TO START A FUNCTIONAL MEDICINE PRACTICE
is to start a functional medicine practice. When you learn a musical instrument, you usually learn one song at a time. You can learn functional medicine the same way, one “song” at a time.

Think of insulin insensitivity as the “Chopsticks” of functional medicine. There are several reasons that make insulin insensitivity (also called insulin resistance or prediabetes) a good place to start:
• It affects a lot of patients
• It is at the root of many of your patients’ complaints
• It is easy to get good results

Too much sugar = too much insulin
The average American consumes more than 200 pounds of sugar each year (compared to about 10 pounds in the 18th century). About half of the calories the average American consumes consist of refined carbohydrates, which the body treats the same way it treats sugar. As a result, we are producing too much insulin. Eventually, we become insensitive to insulin, and that has serious health consequences. Insulin insensitivity can become diabetes if not treated.

A patient can have insulin resistance but still have normal lab results. Insulin resistance can lead to high triglycerides, although that test is not used to diagnose diabetes. A more reliable test...
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is the Hemoglobin A1c test (sometimes just called the A1c test), which indicates blood sugar levels over time. An A1c level of 6.5% or higher on two separate tests indicates that diabetes is present. An A1C between 5.7-6.4% indicates prediabetes (insulin resistance), while below 5.7 is considered normal.

Impacting 1/3 of the population
It affects a lot of patients: There are 100 million patients in the U.S. alone, nearly 1/3 of the population. There are 34 million Americans with Type 2 diabetes (which is just insulin insensitivity that has gotten out of hand). Nearly 25% (7.2 million) of those with diabetes do not know they have the condition. Only 11.6% of those with insulin insensitivity know they have it.

It is at the root of many of your patients’ complaints.
Symptoms of insulin sensitivity include fatigue, weight gain, brain fog, carbohydrate craving, and periods of hypoglycemia after a high-carbohydrate meal (often needing a nap after eating). Many of your patients will just plain feel better when you treat this.

Many more serious health problems can be addressed by treating insulin insensitivity as well. These include:

- **Polycystic ovary disease**
- **Low testosterone in men**
- **Insomnia**: It is common for someone with insulin insensitivity to wake up in the middle of the night and have trouble falling back to sleep.
- **Hypertension**: About half of your patients with hypertension have high blood pressure because of insulin insensitivity.
- **Metabolic syndrome**: High cholesterol, low “good” cholesterol (HDL), high “bad” cholesterol (LDL) and high triglycerides. Medicine does not seem to know what to do about high triglycerides, and often places these patients on statins. Treating insulin insensitivity can lower cholesterol in many patients as well as lowering triglycerides.
- **Obesity**: One of the best strategies for losing weight is to treat insulin insensitivity.
- **Biliary stasis, gallstones**: Bile tends to thicken, creating “biliary stasis.” Early signs of this include dry skin and itching. It can progress to gallstones.
- **Fatty liver**
- **Type 2 diabetes**: If left untreated, insulin insensitivity can lead to Type 2 diabetes.

### Insulin Insensitivity treatment

1. **Diet**: Have the patient pay attention to the glycemic load (not the glycemic index) of the food he or she eats. They are not to eat a food with a glycemic load greater than 10. Charts are available online.

   **Intermittent fasting** is a well-researched way to get insulin insensitivity under control and to lose weight. You have an eight-hour window to eat. There needs to be 16 hours between dinner and breakfast the next morning. If you eat dinner at 5 p.m., breakfast is at 9 a.m. the next morning. It works because when you fast you produce glucagon, which is a hormone that helps to break down fat. This is also why people with insulin insensitivity should be discouraged from snacking between meals.

2. **Exercise**: This should be obvious. For one thing, exercise helps prevent diabetes. The authors of one study stated, “Diet and/or exercise interventions led to a significant decrease in the incidence of diabetes over a six-year period among those with IGT [glucose insensitivity].” There are literally hundreds of scientific studies showing the benefits of exercise for diabetics.
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There are too many to list here. They consistently show a lowering of A1C scores for diabetics who begin an exercise regimen. Light exercise is best, and it should be done daily.

3. Magnesium Orotate (if there are cardiac issues) or Magnesium Taurinate (if there is high blood pressure).
Have the patient take it on an empty stomach (magnesium binds to fats in the diet). Have them take it before bedtime to bowel tolerance. Increase by one tablet each night until stools become soft, then back off. Magnesium and its role in blood sugar control have been extensively studied. Insulin insensitivity and the overproduction of insulin found in Type 2 diabetes may actually interfere with magnesium absorption. Magnesium has even been shown to improve the cholesterol and triglyceride levels of people with Type 2 diabetes.
Magnesium intake can help prevent the transition from prediabetes (glucose resistance) to diabetes. Poor magnesium status may even increase the risk for neuropathy in diabetics. Research found that diabetic patients with polyneuropathy tended to have low levels of magnesium when tested in the red blood cells.

4. Multiple vitamins designed for blood sugar balance: Many nutrients, like B vitamins, vitamin D, magnesium and other nutrients have been shown to improve glucose tolerance. Many of the supplement companies have combined these ingredients to address insulin insensitivity. Give your patient such a product and have them take it according to manufacturer’s recommendations.

5. Berberine: Give 500 mg 3x/day. Berberine has been well-researched and shown to reduce blood sugar and A1C. Studies have shown that berberine can help and that berberine performs similarly to metformin. Subjects have had significant decreases in A1C, fasting blood glucose, postprandial blood glucose, and plasma triglycerides. It has even been shown to lower cholesterol, reduce BMI, and it may also help with fatty liver disease.

Lessen the need for medication
If the patient already has Type 2 diabetes, this same regimen will help. Just make sure they are monitoring blood sugar levels if they are on medication. The program will change their medication need. One supplement that may be helpful to patients who have diabetes is lipoic acid.

Lipoic acid: There are several studies that show lipoic acid to help prevent and reduce suffering from diabetic neuropathy. All these studies not only find that lipoic acid is beneficial to diabetics, but it is also safe. Supplementation should be considered for improving the lipid profile and for protecting against neuropathy in diabetics. The dose is usually 200 mg 3x/day.

Fatty liver and biliary stasis: Insulin insensitivity is linked to fatty liver and biliary stasis. Fatty liver can progress to cirrhosis of the liver. Many studies have found that eating sugar and developing insulin insensitivity causes problems with the liver and gallbladder. If the problem has progressed to biliary stasis, several companies make supplements that are designed to thin bile and address the problem. These products have either an artichoke base or a beet base. Artichoke is preferable because beets have oxalates, which are a problem for many patients (especially those with leaky gut). If your
patient has the following symptoms, consider adding such a product to the regimen.

- Nausea or digestive distress triggered by greasy food
- Dry skin
- Itchy skin
- Clay-colored stools
- Fat or grease in the stool
- Gastric reflux that does not respond to other treatment
- Constipation that does not respond to other treatment
- Bitter or metallic taste in the mouth
- Deficiency in essential fatty acids
- Deficiencies in vitamins A, D, E and K
- Pain under the right rib cage

- Biliary stasis is a possibility in pregnant women with itchy skin

Looking for and treating insulin insensitivity in your patient base will not only get you started with functional medicine, but will also help a lot of your patients.

PAUL VARNAS, DC, DACBN, is a graduate of the National College of Chiropractic and has had a functional medicine practice for 34 years. He is the author of several books and has taught nutrition at the National University of Health Sciences. For a free PDF of “Instantly Have a Functional Medicine Practice,” email him at paulgvargas@gmail.com or visit drvarnas.com.

References can be found online at chiroeco.com
5 MYTHS CBD COMPANIES SPREAD

Watch for this misinformation making rounds on the internet

BY JOE KRYSZAK, MBA
TIME TO READ: 7-9 MIN.

THE TAKEAWAY
From celebrity endorsements to the Entourage Effect to the mislabeling of products, be aware of what has not yet been verified by research and that which is patently false.

DESPITE THE BEST INTENTIONS of many honest CBD companies, there are some out there that aren’t worried about truth getting in the way of selling their products.

Does CBD work? I have personally seen and talked to thousands of chiropractors and patients who believe that it does. Unfortunately, there are companies out there selling CBD that are not afraid of telling lies to move more products. Misinformation and myths are the biggest threat to the CBD industry worldwide. This is truly a game-changing product, and with any new opportunity some companies will lie, cheat and steal to make a buck.

Don’t get us wrong. There are some great CBD companies out there doing a fantastic job educating people about the potential benefits CBD has to offer, but there are also some bad ones that are just looking to cash in. We’re going to look at five of the biggest myths and misconceptions that some unscrupulous CBD and hemp companies are peddling around the internet to help sell their products.

Myth No. 1 — Fake celebrity endorsements
One of the biggest misconceptions that unscrupulous companies are telling in the CBD industry is about who is endorsing their CBD products. The worst thing is that there are already a lot of celebrities willing to support not only other people’s CBD products, but also their own cannabis and CBD brands.

Here are just a couple of lies from the scores of examples we have researched:
We’ve recovered over $15,000,000 in tax overpayments

How much does the IRS owe you?

Dr. Frank Lombardozzi
**Recovered $85,257**

Find out how much the IRS owes you

[SCAN ME]
CBD has a lot of potential to help people with a variety of different things, but currently it’s not endorsed by any significant drug agencies.

**Tom Hanks** — Hanks has been linked alongside Dr. Oz for endorsing CBD companies. He immediately went on the offensive, slamming the companies on Instagram for falsely representing him.

**Oprah Winfrey** — Oprah has the ability to influence millions of people, and some CBD companies are taking advantage of that. Good thing researchers can fact-check them. A company actually named their product “Oprah’s CBD Gummies.” The news was huge, but luckily researchers from USA Today and other publications quickly discovered it was false.

**Myth No. 2 — Millions invested in CBD companies on Shark Tank**

If you haven’t heard of the internationally syndicated television show Shark Tank, it’s a panel-style show where entrepreneurs pitch their products to famous investors.

Head onto Google or any other internet browser and search for “CBD Shark Tank” and see how many different Photoshop images and videos pop up. Luckily, one of the first things that will pop up is a page explicitly warning people not to believe the hysteria of false Shark Tank CBD claims.

Ultimately, what you end up with is overpriced hemp oil or another substitute and being locked into expensive and hard-to-escape contracts. No CBD company has been on Shark Tank, so don’t let the internet fool you.

**Myth No. 3 — False claims about CBD cures**

Most reputable CBD companies are cautious about listing any of the benefits CBD has to offer. Cannabidiol (CBD) has a lot of potential to help people with a variety of different things, but currently it’s not endorsed by any significant drug agencies.

There have been a lot of studies into CBD, and while they look extremely promising, more research has to be done. It is critical that no CBD companies or chiropractors claim CBD can treat or cure any disease. Doing so will put you and your business at risk.

One prime example of what not to do is on the website Ask Dr. Karen. This website has included a long list of things CBD could do for you, including addressing gastric health issues, PTSD, seizure relief, sleep relief, nausea relief and so much more. This is a huge red flag, and I am sure the FDA will be sending notices to this company soon.

Before committing to CBD, it’s essential to understand the facts. The National Institutes of Health has released a very insightful look that summarizes CBD. While they state that CBD is generally safe¹ and has a lot of potential, it’s also reported that more research needs to be conducted.

There is also an important report² released by the U.S. Food and Drug Administration (FDA) warning about CBD products and false claims. The report lists all the different CBD companies that the FDA has sent warning letters to and provides a copy of the warning letter.

**Myth No. 4 — The entourage effect**

The entourage effect is often used by CBD companies to promote full-spectrum CBD products over pure CBD isolate products. One of the most significant claims people use to push full-spectrum CBD products is that CBD’s effects are boosted by combining them with other plant compounds, including terpenes, flavonoids, essential oils and other cannabinoids.

There are some studies and reports that support the entourage effect, but they involve combining substantial doses of CBD with THC. CBD products that contain THC are only legal in countries or states that support legalized or medicinal marijuana programs. Scientific American states that large doses of THC are required for any benefits to be seen by the entourage effect.

One of the only CBD drugs ever approved by the FDA, Epidiolex, is made using CBD isolate only and contains no THC.

**Myth No. 5 — Mislabeling CBD products**

It’s considered industry best practice to not only correctly label all CBD products, but also to include third-party laboratory results that back up the ingredients lists. Not only do these laboratory reports include how much of the active cannabinoid is present in the product, but they also ensure the product doesn’t contain any heavy metals or toxins.

Here is one example of a CBD company that didn’t accurately label their CBD products:
“In a settlement, [company] will fork over $110,000 to Oregon’s cannabis regulator,” reported the Motley Fool website. “[Company], which bills itself as the ‘largest cannabis oil company in Oregon and California,’ reached a settlement with the Oregon Liquor Control Commission on the matter. In the arrangement, [company] is admitting that it mislabeled 186,152 units of its product. In numerous cases, the company apparently did not state the presence of botanical terpenes or MCT oil, ingredients used in vape products. In its marketing, [company] at times claimed that different ingredients considered more preferential were used in its products.”

Look for quality and reputation
While there are some unscrupulous CBD companies out there trying to mislead consumers, there are also some great CBD companies out there trying to educate people about the potential that CBD has.

Look for a trusted brand developed solely for chiropractors and professional health care clinics. CE

JOE KRYSZAK, MBA, is president of Stirling Professional CBD, the brand built by and for chiropractors and professional offices, giving back to the chiropractic industry. Since 2014, Stirling has grown, extracted and produced the purest CBD available. Stirling Professional brings amazing CBD+ products to your patients with the industry-leading lineup of 2,500-mg CBD lotions, THC and THC-free capsules and gels, and four great solutions for better sleep. We bring affordable solutions to your patients. For more information, go to stirlingprofessional.com.
OPENING A NEW CHIROPRACTIC OFFICE REQUIRES A FAIR AMOUNT OF CAPITAL. Whether you plan to build, buy or lease the space needed, you will likely have expenses related to the physical building and surrounding property, chiropractic equipment and devices, office equipment and supplies, hiring and training staff, and more.

Unless you have a stack of cash set aside for your new practice, you’ll likely have to finance some or all of these costs. Understanding the chiropractic start-up financing available is the first step to selecting the best one for you.

Chiropractic start-up financing options
Chiropractors launching a new practice have a variety of financial sourcing options. Some to consider include:

Small business loans – You can reach out to a bank or credit union and ask for the monies needed to start your practice by requesting a business loan backed by the Small Business Administration (SBA).

Medical practice lending – This start-up financing option is designed specifically for health care professionals and medical service providers looking to start or grow their businesses.

Private equity investment – You can also secure financing from investors who want to invest or secure some level of ownership in your non-publicly traded practice.

Commercial line of credit – This form of financing doesn’t usually require you to have any type of collateral and offers a revolving line of credit.

A small business loan tends to be the most appealing, explains Elena Jones, credit and personal finance expert and founder of Finance Jar, a company that provides financial advice and guidance. Why?

“It generally offers fixed periods and more competitive bond yields,” Jones says, “as well as more alternatives and possibilities than non-SBA lending institutions.”

Selecting the best financing options for you
To pick the best start-up financing option for your new practice, it helps to know how each is different. This gives you a better idea of which may be more suitable for your situation and needs.

If you plan to borrow the monies you need, Mario Delgadillo, VP and director of banking division strategy at Baker Boyer Wealth Management, offers additional factors to consider when choosing a lender.

“Make sure they understand your industry, its people, and potential clientele,” says Delgadillo. Also do your research to ensure that the lender’s loan products are competitive, that it has a reputation for providing high-quality service, and that its employees are experienced.

Delgadillo recommends also looking at whether they have had a long-time community presence, have clear and open communication, and are committed to confidentiality, ethics and trust.

Before securing financing
No matter which option you decide, there are a few additional steps you can take to make the process of securing financing easier. One is to create what Delgadillo calls “loan-ready financials.”

Delgadillo recommends that you prepare and compile the following before even visiting your lender: (1) A solid, comprehensive business plan; (2) Business formation documents; and (3) Personal financial statements and tax returns. He also recommends forming your team before securing financing, such as a CPA, bookkeeper, attorney, etc.

To learn more about your financing options, or to get help based on your specific situation, you can reach out to the SBA for individualized assistance and finding a lender via its online Lender Match search.

About Dee Cee Labs
Founded by Dr. Harry Hester in 1962, Dee Cee Labs has a company culture focused on helping folks discover a healthier quality of life through good, sound nutritional products. Their FDA-inspected and approved products are manufactured in-house and contain no harmful chemicals or preservatives. The belief in quality as a tradition, innovation as an ambition and service as a commitment is what drives them.

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DEAR DOCTOR OF CHIROPRACTIC,

You are essential to the health care of America. Your patients count on you to help them through this difficult time, as do your family and friends. If you’re a business owner your employees are counting on you also.

In pre-pandemic times there was less to worry about and it was easier to find mental escapes and downtime. Now we’re trying to create that new normal as a society, trying to make it look as close to the old normal we can, for both doctors of chiropractic and their patients.

WE'RE IN IT TOGETHER

Last year we told the story of the two young chiropractors who 30 years ago attained their DC degrees, both near the top of the same graduating class and full of enthusiasm to enter chiropractic care. When they returned for their 30-year reunion, both were married with family and had stayed in touch over the years. But while one worked in a multi-doctor practice, the other had founded his own multi-location practice and as CEO was contemplating an early retirement.

THE DIFFERENCE?

How and why did the two DC’s paths diverge? Both sought success. Both were near the top of their class in school. Both entered the field with enthusiasm. The difference-maker was the business of chiropractic – learning the economics of the industry. The eventual CEO subscribed to *Chiropractic Economics* and gained the knowledge to take his practice to the next level.

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Whether you are new in the field or have 30 years under your belt, subscribe or add two years to your current subscription, for free, at chiroeco.com/subscribe today. We cannot guarantee your success in the industry, but as a reader of Chiropractic Economics you are essential, you’ll be best equipped for success.

Sincerely,

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Online
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903-243-3372
CCEDSEMINARS.COM

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Orlando, FL
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DESIGNSFORHEALTH.COM

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CLEVELAND CENTENNIAL & MIDWEST ANNUAL CONFERENCE AND EXPO
Overland Park, KS
Sponsor: Cleveland University – Kansas City
EXPO2022.CLEVELAND.EDU

OCT 22-23
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Chesterfield, MO
Sponsor: Logan University
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MORE PATIENTS, LESS EFFORT: HOW TO GET CONSISTENT WITH MARKETING
- Learn what exactly gets in the way of consistent marketing and how to solve it
- 3 quick wins: Easy ways to get more patients with less effort
- How to create an email that generates a 26% open rate & 15% reply rate
- What you need to do to finally get consistent with marketing

Chad Madden, PT, MSPT, is the Founder of Madden Physical Therapy and the Co-Founder of Breakthrough. Since opening his practice in 2003, Chad has scaled it across 6 clinic locations and recently sold 70% of his practice for $11.5 million. Through Breakthrough, Chad helps hundreds of chiropractors and physical therapists scale and grow their practice value. Chad is the author of 3 Books: Pain Free Motion™ for Your Lower Back: Relief without Medications, Injections and Surgery; Killer Marketing Secrets; Back to Normal. He is the host of the Grow Your Practice Podcast.

SPEAKER: TRACIE LEONHARDT, D.O.
SPEAKER: MONA ROSENE, MS, RD
SPEAKER: CHAD MADDEN

HOW TO BUILD A CHIROPRACTIC MARKETING CALENDAR (IN UNDER AN HOUR)
Chad Madden is the Co-Founder of Breakthrough and Owner of Madden & Gilbert PT. Since opening his private practice in 2003, Chad has scaled it across 6 clinic locations and recently received a valuation of $16.5 Million. Through Breakthrough, Chad helps hundreds of chiropractors and physical therapists get consistent patient visits. Chad is the author of 3 Books: Pain Free Motion™ for Your Lower Back: Relief without Medications, Injections and Surgery; Killer Marketing Secrets; Back to Normal.

Most chiropractors I talk to fall into one of two categories. 1) You wish you could do more marketing but you feel time-starved and not sure where to begin or 2) You do some marketing, but you want to get more consistent — if only you had the time. No matter which group you fall into, time is the major obstacle. Yet marketing is vital to your success. That's why I want to share a time-saving 12-month marketing calendar that generates consistent, predictable patient visits. Over the last 5 years, I 4X'ed the value of my practice with the strategies included in this tool.

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SPEAKER: CHAD MADDEN, BREAKTHROUGH COFOUNDER AND PRIVATE PRACTICE OWNER

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