

Health Care Reform
***How to participate in coordinated
care organizations***

James J. Lehman, DC, MBA, FACO
Director

Health Sciences Postgraduate Education
University of Bridgeport

Learning Objectives

- Realize the value of chiropractic services
- Comprehend “Health Care Reform”
- Realize the value of “Section 2706”
- Understand types of coordinated care organizations
- Understand the process of integrating into coordinated care organizations

Discussions Are Encouraged Regarding Health Care Reform



- History
- Purpose
- Implementation
- Coordinated care organizations
- Integration
- Participation
- Reimbursements
- Salaries

Please do not

- Bash anyone
- State why ACA is not a law or will not last
- Express angry opinions regarding health care reform



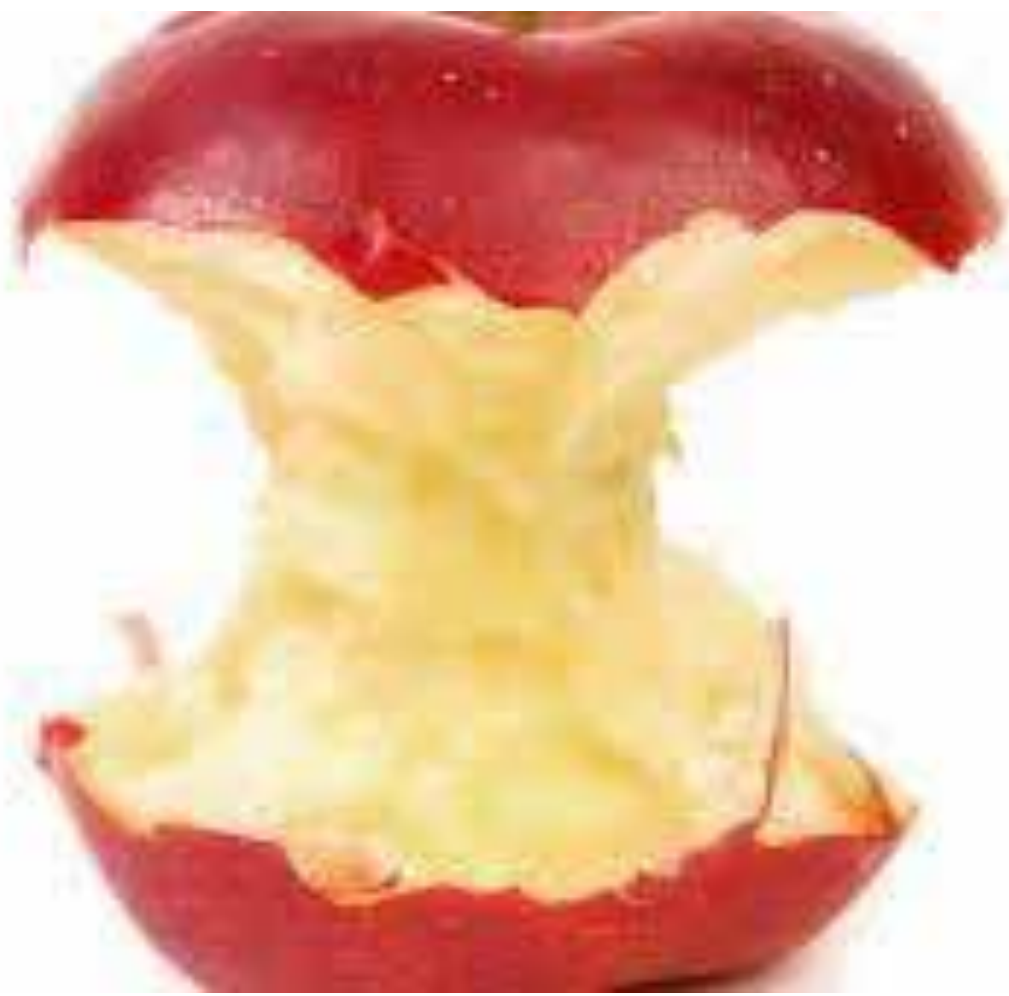
Please do ask

- How does the ACA enable patients to receive access to chiropractic care?
- How do I learn more about health care reform and accountable care organizations?
- What do I need to do to become a valuable member of the medical team?
- How can chiropractors integrate into coordinated care organizations?



Are you able to change?





Health Care and the Value of Chiropractic Services

- What is the value of chiropractic services?



Examples of Compensation

- Accountable Care Organization
- Community Health Center
- Patient-Centered Medical Home



Accountable Care Organization Agreement

- Private practice contracted to provide rehabilitation and spinal manipulation services under the umbrella of an ACO.
- \$200-300 per visit
- ACO refers patients to your facility
- ACO provides electronic health record system
- ACO bills for services rendered
- Costs include 8% for billing and 20% for ACO services

Community Health Center

- Provides facility, employees, EHR, billing services, liability insurance, equipment and benefits
- Primary care providers refer patients for chiropractic services
- Salary of \$100,000 to \$200,000 per annum

Patient-Centered Medical Home

- Provides facility, employees, EHR, billing services, liability insurance, equipment and benefits
- Primary care providers refer patients for chiropractic services
- Independent contractor with payment of \$50-100 per patient visit

- What does **Health Care Reform** mean to you?



- **Health care reform** is a general rubric used for discussing major health policy creation or changes—for the most part, governmental policy that affects health care delivery in a given place.



Health care reform typically attempts to:

- Broaden the population that receives health care coverage through either public sector insurance programs or private sector insurance companies
- Expand the array of health care providers consumers may choose among
- Improve the access to health care specialists
- Improve the quality of health care
- Give more care to citizens
- Decrease the cost of health care

History

- **Health care reform in the United States** has a long history.
- Reforms have often been proposed but have rarely been accomplished.



History of Health Care Reforms

- **1965 Medicare**
- **1985 Consolidated Omnibus Budget Reconciliation Act (*COBRA*)**
- **1996 Health Insurance Portability and Accountability Act (*HIPPA*)**
- **1997 Children's Health Insurance Program (*CHIP*)**
- **2010 Patient Protection and Affordable Care Act (*PPACA*)**

Why Reform Our Health Care System?



OUR HEALTHCARE REFERRAL SYSTEM IS BROKEN



There are an estimated:



- 811,552 physicians
- 191,168 dentists
- 5,008 hospitals
- 5,211 imaging centers
- 15,622 Nursing homes
- 209,499 laboratories

In the United States

Most of which are still exchanging referrals with paper triplicate forms and faxes which result in patient information being misplaced, lost or misfiled

- *It's fairly well accepted that the U.S. is the most expensive healthcare system in the world, but many continue to falsely assume that we pay more for healthcare because we get better health (or better health outcomes). The evidence, however, clearly doesn't support that view.*
- Munroe D. Pharma and Health Care
<http://www.forbes.com/sites/danmunro/2014/06/16/u-s-healthcare-ranked-dead-last-compared-to-10-other-countries/>

U.S. HEALTH CARE RANKS LAST AMONG WEALTHY COUNTRIES

A recent international study compared 11 nations on health care quality, access, efficiency, and equity, as well as indicators of healthy lives such as infant mortality.

Overall Health Care Ranking



Source: K. Davis, K. Stremikis, D. Squires, and C. Schoen, *Mirror, Mirror on the Wall: How the Performance of the U.S. Health Care System Compares Internationally, 2014 Update*, The Commonwealth Fund, June 2014.



The
COMMONWEALTH
FUND

EXHIBIT ES-1. OVERALL RANKING

COUNTRY RANKINGS

| |
|-----------|
| Top 2* |
| Middle |
| Bottom 2* |



AUS CAN FRA GER NETH NZ NOR SWE SWIZ UK US

| | AUS | CAN | FRA | GER | NETH | NZ | NOR | SWE | SWIZ | UK | US |
|---|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| OVERALL RANKING (2013) | 4 | 10 | 9 | 5 | 5 | 7 | 7 | 3 | 2 | 1 | 11 |
| Quality Care | 2 | 9 | 8 | 7 | 5 | 4 | 11 | 10 | 3 | 1 | 5 |
| Effective Care | 4 | 7 | 9 | 6 | 5 | 2 | 11 | 10 | 8 | 1 | 3 |
| Safe Care | 3 | 10 | 2 | 6 | 7 | 9 | 11 | 5 | 4 | 1 | 7 |
| Coordinated Care | 4 | 8 | 9 | 10 | 5 | 2 | 7 | 11 | 3 | 1 | 6 |
| Patient-Centered Care | 5 | 8 | 10 | 7 | 3 | 6 | 11 | 9 | 2 | 1 | 4 |
| Access | 8 | 9 | 11 | 2 | 4 | 7 | 6 | 4 | 2 | 1 | 9 |
| Cost-Related Problem | 9 | 5 | 10 | 4 | 8 | 6 | 3 | 1 | 7 | 1 | 11 |
| Timeliness of Care | 6 | 11 | 10 | 4 | 2 | 7 | 8 | 9 | 1 | 3 | 5 |
| Efficiency | 4 | 10 | 8 | 9 | 7 | 3 | 4 | 2 | 6 | 1 | 11 |
| Equity | 5 | 9 | 7 | 4 | 8 | 10 | 6 | 1 | 2 | 2 | 11 |
| Healthy Lives | 4 | 8 | 1 | 7 | 5 | 9 | 6 | 2 | 3 | 10 | 11 |
| Health Expenditures/Capita, 2011** | \$3,800 | \$4,522 | \$4,118 | \$4,495 | \$5,099 | \$3,182 | \$5,669 | \$3,925 | \$5,643 | \$3,405 | \$8,508 |

Notes: * Includes ties. ** Expenditures shown in \$US PPP (purchasing power parity); Australian \$ data are from 2010.

Source: Calculated by The Commonwealth Fund based on 2011 International Health Policy Survey of Sicker Adults; 2012 International Health Policy Survey of Primary Care Physicians; 2013 International Health Policy Survey; Commonwealth Fund *National Scorecard 2011*; World Health Organization; and Organization for Economic Cooperation and Development, *OECD Health Data, 2013* (Paris: OECD, Nov. 2013).

The Commonwealth Fund

“Mirror, Mirror On The Wall — 2014 Update”

- *The most notable way the U.S. differs from other industrialized countries is the absence of universal health insurance coverage.*
- *Other nations ensure the accessibility of care through universal health systems and through better ties between patients and the physician practices that serve as their medical homes.*



What is
**Universal
Health
Care?**

***Universal Health Care Coverage Is Not “Single Payer”
Healthcare***



World Health Organization Definition

- Universal coverage (UC), or universal health coverage (UHC), is defined as ensuring that all people can use the promotive, preventive, curative, rehabilitative and palliative health services they need, of sufficient quality to be effective, while also ensuring that the use of these services does not expose the user to financial hardship.

Profound Effects Caused by Lack of Universal Health Care Coverage

1. The U.S. is the only country where medical expenses are a contributing (if not leading) cause of personal bankruptcies
2. The U.S. is the only country where employer provided healthcare coverage often plays into employment decisions
3. The U.S. is the only country where (according to The Commonwealth Fund this last April) there are now 84 million non-elderly Americans that are either uninsured – or underinsured

American Nurses Association

- For decades, the American Nurses Association has been advocating for health care reforms that would guarantee access to high-quality health care for all. With the passage of the Patient Protection and Affordable Care Act (PPACA), millions of people have greater protection against losing or being denied health insurance coverage, and better access to primary and preventive services. ANA recognizes the debate of health care is not over, and remains committed to educating the nursing public about how the changing system impacts our lives and our profession.

Physician Associations Position

- Recognizing that many newly elected Members of Congress campaigned on fixing the health care system, ten of the nation's leading physician associations established principles to serve as a guide for Congress to improve both individual health and the collective health care system in the U.S.

Physician Associations

American Academy of Family Physicians
American Academy of Orthopaedic Surgeons
American College of Cardiology
American College of Emergency Physicians
American College of Obstetricians and
Gynecologists
American College of Osteopathic Family
Physicians
American College of Physicians
American College of Surgeons
American Medical Association
American Osteopathic Association

Principles for the Reform of the U.S. Health Care System

- Health care coverage for all is needed to ensure quality of care and to improve the health status of Americans.
- The health care system in the U.S. must provide appropriate health care to all people within the U.S. borders, without unreasonable financial barriers to care.
- Individuals and families must have catastrophic health coverage to provide protection from financial ruin.

Principles for the Reform of the U.S. Health Care System

- Improvement of health care quality and safety must be the goal of all health interventions, so that we can assure optimal outcomes for the resources expended.
- In reforming the health care system, we as a society must respect the ethical imperative of providing health care to individuals, responsible stewardship of community resources, and the importance of personal health responsibility.

Principles for the Reform of the U.S. Health Care System

- Access to and financing for appropriate health services must be a shared public/private cooperative effort, and a system which will allow individuals/employers to purchase additional services or insurance.
- Cost management by all stakeholders, consistent with achieving quality health care, is critical to attaining a workable, affordable and sustainable health care system.

Principles for the Reform of the U.S. Health Care System

- Less complicated administrative systems are essential to reduce costs, create a more efficient health care system, and maximize funding for health care services.
- Sufficient funds must be available for research (basic, clinical, translational and health services), medical education, and comprehensive health information technology infrastructure and implementation.

Principles for the Reform of the U.S. Health Care System

- Sufficient funds must be available for public health and other essential medical services to include, but not be limited to, preventive services, trauma care and mental health services.
- Comprehensive medical liability reform is essential to ensure access to quality health care.
- American Academy of Family Practice
- <http://www.aafp.org/about/initiatives/principles-for-reform.html>

Patient Choice Essential to Real Health Care Reform

- Patients' Right to Choose Treatment and Provider Will Cut Costs, Improve Quality of Care
- American Chiropractic Association
- http://www.acatoday.org/press_css.cfm?CID=4892



Patient Choice Essential to Real Health Care Reform

- The American Chiropractic Association (ACA) remains committed to advocating for the rights of patients to choose the provider and treatments they feel are best suited for them...

Patient Choice Essential to Real Health Care Reform

- Allowing patients to choose providers who offer less expensive, conservative treatments is one important way to both reduce health care costs and address the growing primary care shortage in this country.

Patient Choice Essential to Real Health Care Reform

- “As our nation continues in its quest to improve the health care system, it will need to look at options outside the status quo,” said ACA President Keith Overland, DC.



Patient Choice Essential to Real Health Care Reform

- “Doctors of chiropractic can provide conservative primary care that saves money.
- ACA will continue to work with legislators to ensure that health reform is implemented in a responsible way that removes artificial barriers to patients’ choices.”



Centers for Medicare and Medicaid Innovation

- A branch of the United States government under the Centers for Medicare and Medicaid Services.
- It was created by the Patient Protection and Affordable Care Act, the 2010 U.S. health care reform legislation.
- Guterman S, Davis K, Stremikis K, Drake H (June 2010). "Innovation in Medicare and Medicaid will be central to health reform's success". *Health Aff (Millwood)* **29** (6): 1188–93.

Centers for Medicare and Medicaid Innovation

- "The center is to test innovative payment and delivery system models that show important promise for maintaining or improving the quality of care in Medicare, Medicaid, and the Children's Health Insurance Program (CHIP), while slowing the rate of growth in program costs".
- Guterman S, Davis K, Stremikis K, Drake H (June 2010). "Innovation in Medicare and Medicaid will be central to health reform's success". *Health Aff (Millwood)* **29** (6): 1188–93.

Centers for Medicare and Medicaid Innovation

- The center "is to give priority to twenty models specified in the law, including medical homes, all-payer payment reform, and arrangements that transition from fee-for-service reimbursement to global fees and salary-based payment".
- Guterman S, Davis K, Stremikis K, Drake H (June 2010). "Innovation in Medicare and Medicaid will be central to health reform's success". *Health Aff (Millwood)* **29** (6): 1188–93.

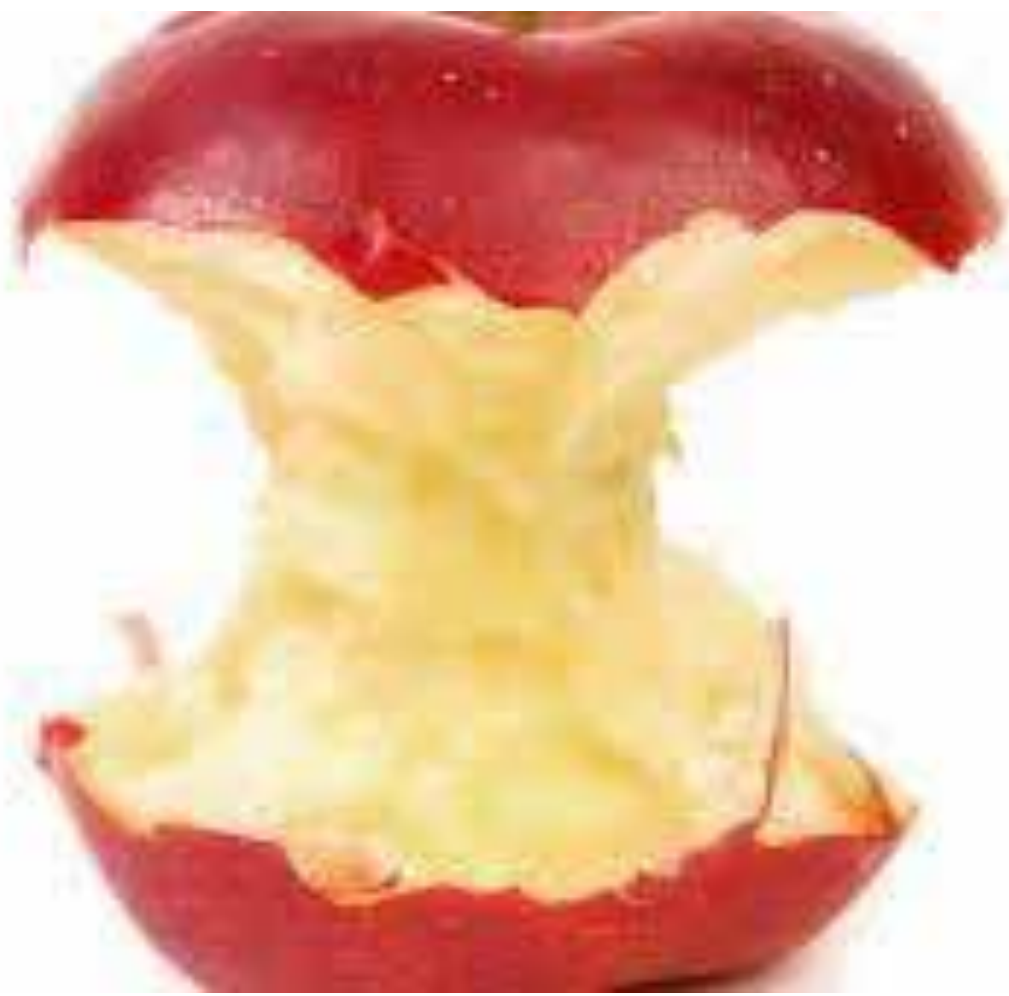
Centers for Medicare and Medicaid Innovation

- It is "intended to overcome antireform inertia by creating a mechanism for the diffusion of successful pilot programs" without requiring Congressional approval.
- Meredith B. Rosenthal (May 2011). "Hard choices — Alternatives for reining in Medicare and Medicaid spending". *The New England Journal of Medicine* **364** (20): 1887–1890.



Does Health
Care Reform
affect
access to
chiropractic
services?



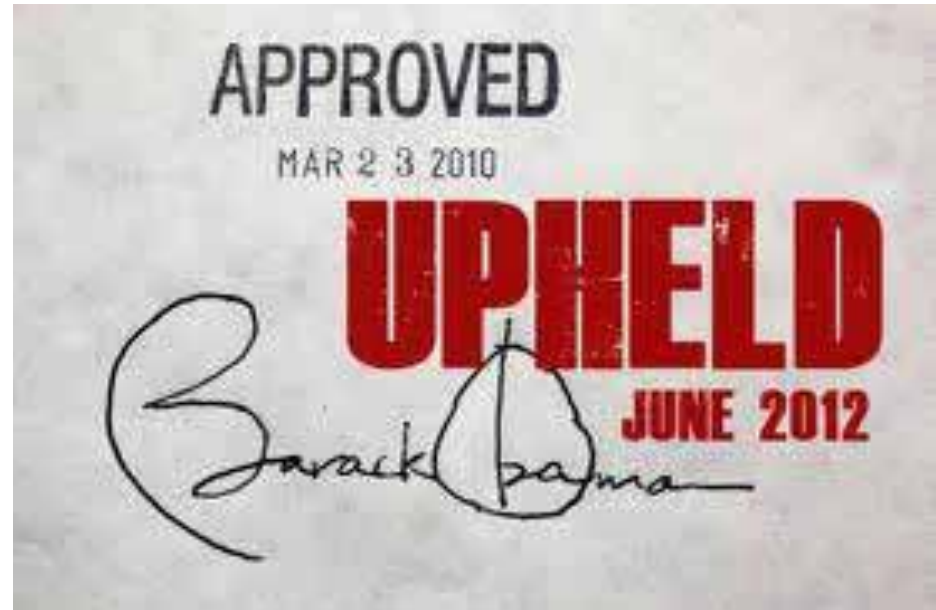


- The passing of the Affordable Care Act has created an entirely new health care system with coordinated care organizations that focuses on integrated, holistic, patient-centered and evidence-based primary care.



Affordable Care Act

- Patient Protection and Affordable Care Act” — approved by Congress and signed into U.S. law includes several provisions of earlier legislation, titled the “National Pain Care Policy Act of 2009.”



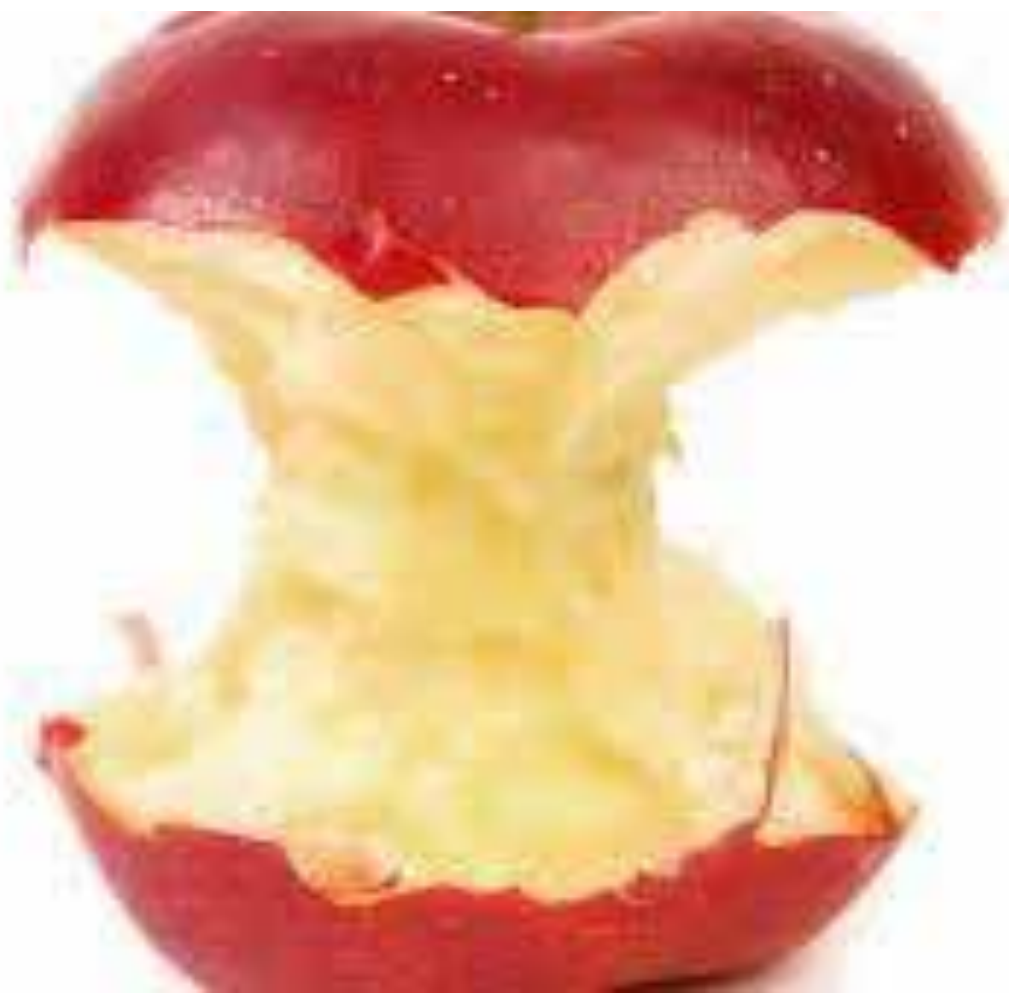
Health Care Reform



- ACA highlights the need for more effective evaluation and management of acute and chronic pain.

Health Care Reform

- Chronic pain treatment needs major reforms to enhance assessment, increase access to the right care, improve quality and equitable care, and cut costs. Initiatives to address the huge public health problem of unrelieved chronic pain should be part of any discussion on reforming the health care system to enhance access and reduce costs.
- A Call To Revolutionize Chronic Pain Care in America: An Opportunity in Health Care Reform.



- *The Affordable Care Act permits chiropractors to function as members of the primary care team. The language in the bill ensures that doctors of chiropractic can be included on these patient-centered and holistic teams. The non-discrimination provision (Section 2706) lifts some of the burden imposed by unfair limitations of certain insurance companies.*

**The ACA nondiscrimination provision
(Section 2706) states:**

- *“A group health plan and a health insurance issuer offering group or individual health insurance coverage shall not discriminate with respect to participation under the plan or coverage against any health care provider who is acting within the scope of that provider’s license or certification under applicable State law.*

Section 2706

- *This section shall not require that a group health plan or health insurance issuer contract with any health care provider willing to abide by the terms and conditions for participation established by the plan or issuer. Nothing in this section shall be construed as preventing a group health plan, a health insurance issuer, or the Secretary from establishing varying reimbursement rates based on quality or performance measures.”*



- Will you integrate chiropractic services into a coordinated care organization?



What is a
**Coordinated
Care
Organization?**

Coordinated Care Organizations

- A coordinated care organization, or CCO, is a network of all types of health care providers (physical health care, addictions and mental health care and sometimes dental care providers) who have agreed to work together in their local communities to serve people who receive health care coverage under the Oregon Health Plan (Medicaid).



Coordinated Care Organizations

Chronic Disease Management

prevention

Outcomes

Health Equity

Mental Health Provider
A & D treatment

Doctor

Labs

Pharmacist

Xray

Drugs

Dentist

Hospital



Coordinated Care Organizations

- CCOs have the flexibility to support new models of care that are patient-centered and team-focused, and reduce health disparities.



Coordinated Care

- Community Coordinated Care for Children, Inc. (4C) has been a trusted resource for Central Florida families for over four decades, providing solutions to the challenges of affordability, accessibility, and quality of child care in our community.



Accountable Care Organization (ACO)

- An ACO is a collaboration of doctors and hospitals that share the responsibility for providing coordinated care to patients in order to limit unnecessary spending.



ACO Operating Model



Medicare and Medicaid

- The Patient Protection and Accountable Care Act of 2010 (ACA) opened up new opportunities for Medicare and Medicaid beneficiaries to take advantage of care in an Accountable Care Organization and gave ACOs new opportunities to serve this important population.

National Assn of ACOs (NAACOS)

- Accountable Care Organizations (ACOs) offer enormous opportunity for patients and providers to work together to increase quality of care, lower costs and improve the health of the community.



NAACOS Mission

- Foster growth of ACO models of care;
- Participate with Federal Agencies in development & implementation of public policy;
- Provide industry-wide uniformity on quality and performance measures;
- Educate members in clinical and operational best practices;
- Collectively engage the vendor community, and
- Educate the public about the value of accountable care.

Florida Association of Accountable Care Organizations (FLAACO)



Leaders in Value Based Care

- FLAACOs is the premier professional organization for Accountable Care Organizations (ACOs) throughout Florida.

Florida Association of Accountable Care Organizations (FLAACO)

- ACOs are designed to incent providers to work together to increase quality of care delivered to patients while significantly lowering medical costs overall.



Florida Association of Accountable Care Organizations (FLAACO)

- New shared savings payment arrangements are being developed by both government and private sector payers that are encouraging the fast growth of these Accountable Care models.



Florida Association of Accountable Care Organizations (FLAACO)

- FLAACOs 16 members are organized in a vibrant network of state affiliate groups that share FLAACOs goals in working on behalf of ACO professionals.



Florida Association of Accountable Care Organizations (FLAACO)



- FLAACOs encourages the exchange of diverse opinions and to further discussion, dialogue, and reflection of particular topics relevant to FLAACOs.

Florida Association of Accountable Care Organizations (FLAACO)

- Participate in discussions throughout the year, join one of the FLAACOs committees and attend the FLAACOs Annual Conference. Educate yourself with member only meetings.



**10 new Florida accountable
care organizations**

Accountable Care Coalition of Northwest Florida LLC

City: Pensacola

**Info: Comprised of
networks of individual
ACO practices, with 60
physicians. It will serve
Medicare beneficiaries in
Alabama and Florida.**

Source: U.S. Centers for Medicare



Orlando Business Journal

Accountable Care Organizations

- ACOs are intended to foster greater accountability in traditional fee-for-service programs by rewarding participating healthcare provider groups that realize the two hallmarks of healthcare reform: slower spending growth and higher-quality care.

Accountable Care Organizations

- Under the Affordable Care Act, groups that save Medicare money while also meeting certain quality targets are entitled to "share" a portion of the savings.



Accountable Care Partners (ACP)

- Accountable Care Partners (ACP) is a Medicare Shared Savings Accountable Care Organization focused on better patient care through coordination and accountability.



Accountable Care Partners (ACP)

- Each provider in the Accountable Care Partners network has voluntarily come together to work as a team to improve the quality and coordination of healthcare for the Medicare Beneficiaries they serve.



Palm Beach Accountable Care Organization



**COMPREHENSIVE
PAIN CARE
OF SOUTH FLORIDA**

- Palm Beach Accountable Care Organization, LLC (PBACO) was accepted by the Centers for Medicare & Medicaid Services on July 1, 2012.

Palm Beach Accountable Care Organization

- PBACO is a rapidly growing network of physicians and healthcare professionals dedicated to working in a consistent and cohesive manner to improve the care of Medicare Beneficiaries and lower the growth in health care expenditures.

Palm Beach Accountable Care Organization

- PBACO is composed of physicians who voluntarily agreed to work together to provide high standards of healthcare through a philosophy of continuous quality improvements aimed at achieving the best outcomes in a consistent manner.

- What is a Patient-Centered Medical Home?



Patient-Centered Medical Home

- The Agency for Healthcare Research and Quality (AHRQ) defines a medical home not simply as a place but as a model of the organization of primary care that delivers the core functions of primary health care.

The medical home encompasses five functions and attributes

- 1. Comprehensive Care**
- 2. Patient-Centered**
- 3. Coordinated Care**
- 4. Accessible Services**
- 5. Quality and Safety**



Patient-Centered Medical Home

Park Avenue Medical

202 N. Park Avenue
Apopka, FL 32703

CENTRAL FLORIDA

*wellness for the
entire
family*



Patient-Centered Medical Home

Park Avenue Medical

- We are a private Family Medicine group practice established in 1986. We are dedicated to serving our patients with the highest quality care in a professional and compassionate manner.
- Treating patients from newborns to the elderly and providing state of the art care for acute illness, chronic medical problems as well as minor outpatient surgical procedures.

Patient-Centered Medical Home

Park Avenue Medical

- Park Avenue Medical is a leader among Florida health-care providers, respected for its expertise, innovation in health-care delivery and quality of care.
- While discussions of health frequently focus on competition and managed costs, Park Avenue Medical has not lost sight of the people behind the numbers or its mission to serve patients with the latest procedures and treatments.

Patient-Centered Medical Home

Park Avenue Medical

- The medical staff is comprised of more than five Board Certified Physicians, a Physician-Assistant and a Registered Nurse.
- With advanced technologies available right at our fingertips, we are able to provide the most comprehensive approach to both diagnosis and treatment.

Patient-Centered Medical Home

Park Avenue Medical

- Park Avenue Medical is currently seeking both accreditation and NCQA PCMH recognition. We have our own registered nurse who works with comprehensive programs such as heart failure, COPD, and other chronic medical problems. She is here to assist patients with everything from questions and medications, hospital discharge planning and health education.

Community Health Centers



NATIONAL ASSOCIATION OF

Community Health Centers

Community Health Center

- HRSA-supported health centers have provided comprehensive, culturally competent, quality primary health care services to medically underserved communities and vulnerable populations.

Health Center Program Fundamentals

- **Located in or serve a high need community**
- **Governed by a community board**
- **Provide comprehensive primary health care** services as well as supportive services (education, translation and transportation, etc.) that promote access to health care.
- **Provide services available to all** with fees adjusted based on ability to pay.
- **Meet other performance and accountability requirements**

Community Health Centers

- HHS Secretary Sylvia Mathews Burwell announced today the availability of \$100 million from the Affordable Care Act to support estimated 150 new health center sites across the country in 2015.
- New health center sites will increase access to comprehensive, affordable, high quality primary health care services in the communities that need it most.

Community Health Centers

- Health and Human Services (HHS) Secretary Sylvia Mathews Burwell today announced \$83.4 million in Affordable Care Act funding to support primary care residency programs in 60 Teaching Health Centers across the nation.
- The funding will help train more than 550 residents during the 2014-2015 academic year, increasing the number of residents trained in the previous academic year by more than 200 and helping to increase access to health care in communities across the country.

Community Health Centers of Florida

- Since 1981, the Florida Association of Community Health Centers, Inc. (FACHC) has been the leading state advocate for community-based health care programs.
- Focusing on Florida's Federally Qualified Community Health Centers, the Association plays a vital role in educating federal, state and local policymakers about issues relating to health care and the role of the health centers.
- The primary mission of FACHC is to improve access to quality health services by bringing together agencies, legislators and key persons able to affect health care services.

Community Health Centers



"Patient Care Comes First"

Community Health of South Florida, Inc.

- Community Health of South Florida Inc. started out as a beacon of hope for the uninsured more than 40 years ago.
- Today it has grown into a comprehensive nonprofit healthcare company that cares for nearly 300,000 insured and uninsured patients every year.
- It has 10 health centers spanning from the Keys to South Dade and into Coconut Grove. It also has 42 school-based health centers.

- How does a chiropractor become a valuable member of the health care team?



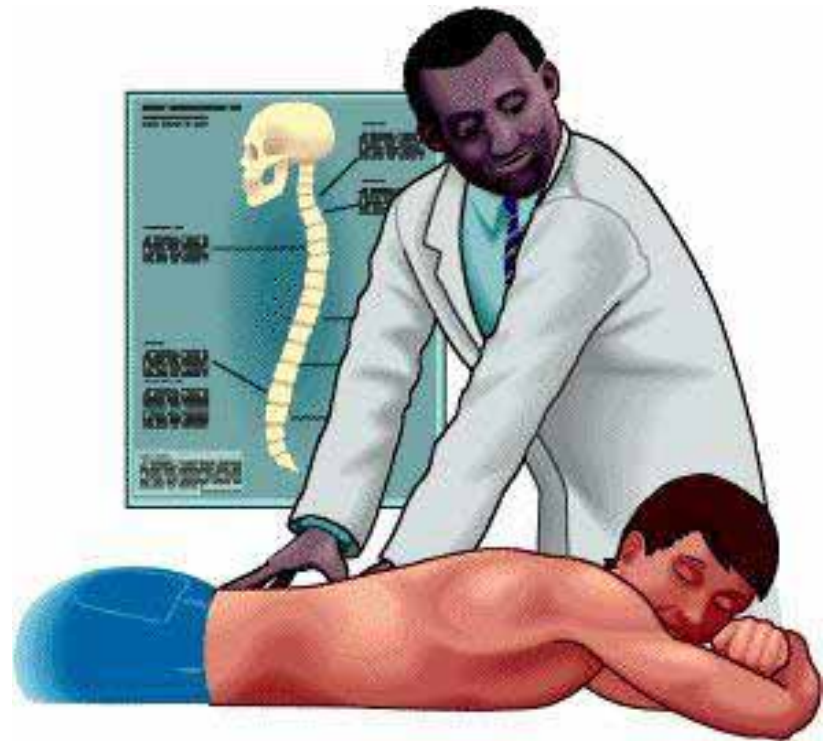
Market Needs

- What services are missing in primary care that can be provided by a chiropractic specialist?



Chiropractic Services

Most chiropractic physicians function as neuromusculoskeletal specialists and not primary care providers.



Chiropractic Services

- Chiropractic clinicians should be positioned on primary care teams as the neuromusculoskeletal medicine specialists, evaluating and treating patients with acute and chronic pain.



Salary Comparison

- Primary care physician
= \$150,000 plus...
- Physician Assistant
(mid-level)
= \$80,000 to start
- Chiropractic associate =
\$40,000- \$50,000



Marketing of Health Care Services



- You should market your chiropractic services to allopathic and/or osteopathic physicians, and coordinated care organizations.

Marketing of Health Care Services



*Business of
Medicine*

- All healthcare providers, most notably specialists compete for market share because of shrinking third-party reimbursements and health care reform.

Marketing Chiropractic Services

- If you market your services to primary care providers and coordinated care organizations, you may improve patient access to your chiropractic services...



Marketing of Health Care Services



Business of Medicine

- All healthcare providers, most notably specialists compete for market share.
- Chiropractors are considered to be specialists...

Needs-Based Marketing Process



- Research the market
- Research PCP needs, expertise and resistance to refer to you
- Express your interests in collaboration, evidence-based practice and patient-centered care
- Explain the value of your services
- Communicate applicable research
- Provide proper referral request and clinical information

Research

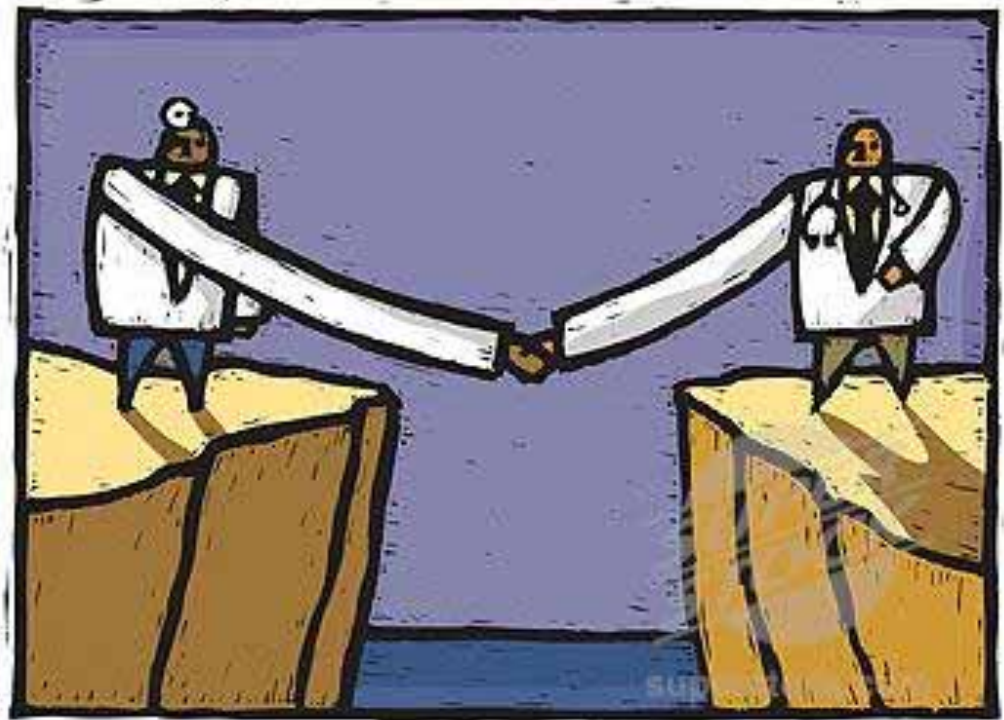
- Read
 - The National Prevention Strategy
 - A Call to Revolutionize Chronic Pain Care in America: An Opportunity in Health Care Reform.
 - Healthcare Reform: Implications for Chiropractic
 - Health Care Reform: *Primary Care Teams in ACOs*
 - The Value of Evidence-Based Practice

Research

- Investigate the names, locations, and leadership of the coordinated care organizations in your area
 - Community Health Centers
 - Accountable Care Organizations
- Seek out the names of individuals capable and willing to make referrals or introductions, such as primary care providers.

Action Steps

- Introduce yourself to the physicians and leaders
- Provide a professional package of marketing materials
- Do not belittle the medical profession or discuss subluxation



Customer Demand



- Over 80% of patients ask PCP about a chiropractic referral
- **Intra-professional and inter-professional referral patterns of chiropractors**
- <http://www.chiroandosteo.com/content/14/1/12>

PCP Resistance to Refer to Chiropractor

- Primary care providers prefer that a patient contact the chiropractor.

Greene BR, Smith M, Allareddy V, Haas M:
**Referral Patterns and
Attitudes of Primary Care Physicians
Towards Chiropractors.**

*BMC Complement Altern Med 2006,
6(1):5.*

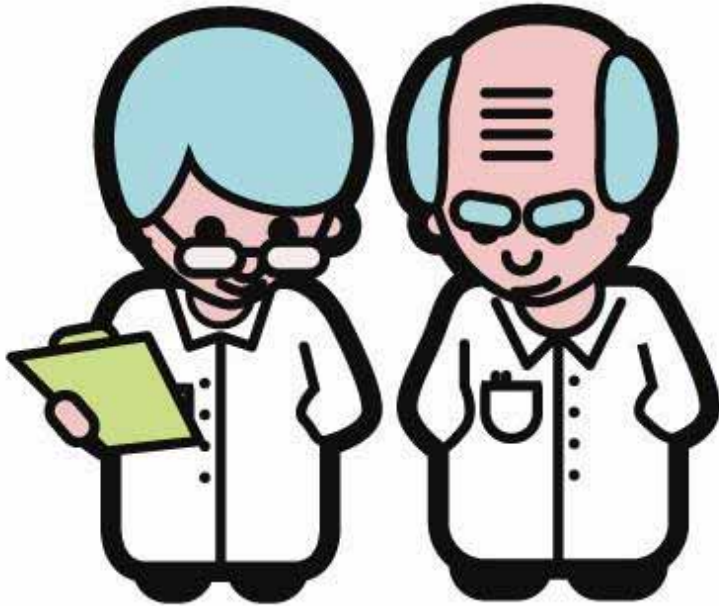


Medical Doctor Referral to a Chiropractor



- Only 30% of primary care providers will consider making a referral to a chiropractor...

PCP Referral Patterns



- 99% of PCP's initiate referral to another allopath
- Only 11% of PCP's initiate referral to a chiropractor.
- Greene BR, Smith M, Allareddy V, Haas M: **Referral Patterns and Attitudes of Primary Care Physicians Towards Chiropractors.**
- *BMC Complement Altern Med* 2006, **6(1):5.**

Medical Referral to a Chiropractor



- Why would a medical doctor be concerned with making a referral of a patient to a chiropractor?

Rejection of Chiropractic Referral

- The common reasons for not accepting a referral from chiropractors were the absence of a formal referral and health problems outside the PCP's area of expertise.
- Greene BR, Smith M, Allareddy V, Haas M: **Referral Patterns and Attitudes of Primary Care Physicians Towards Chiropractors.**
- *BMC Complement Altern Med* 2006, **6(1):5.**



Remove the Barriers and Improve Interpersonal Referral Relationships Between Primary Care Physicians and Chiropractors

- Both MDs and DCs suggested that **good communication, openness to discussion** by providers, and **patient interest** are key factors for developing positive interprofessional referral relationships and implementing interprofessional practice-based research networks.
- Facilitators and barriers to improving interprofessional referral relationships between primary care physicians and chiropractors. [J Ambul Care Manage.](#) 2007 Oct-Dec;30(4):347-54.

Remove the Barriers and Improve Interpersonal Referral Relationships Between Primary Care Physicians and Chiropractors

- Barriers to interprofessional relationships include **lack of good communication** between the 2 provider types, **bias** toward alternative medicine, **lack of knowledge** or understanding of chiropractic care, **geographic constraints**, and **economic considerations**.

Successful Interprofessional Relationships Require...

- Understanding of both professions' strengths and weaknesses
- Research infrastructure
- Evidence-based practice
- Patient-centered model

Marketing Strategy

- Provide example of medical record and referral document.
- Referral letter/document should be brief but concise and accompanied by SOAP note.

REFERRAL FOR CONSULTATION

Patient Name _____ Date Prepared: ___/___/___ (yy/mm/dd)
 DOB _____
 Patient Contact Info _____ Tel: _____ Fax: _____
 OHIP # _____

URGENT/ timing: _____ Non-urgent As per availability

REASON for REFERRAL

Referral To: _____ Tel: _____ Fax: _____
 Address: _____
 Referral for Asthma Diabetes Mellitus Hypertension Other: _____
 Reason(s): _____
 New Problem(s) relevant to this request:
 1. _____
 2. _____
 Questions/Expectations:
 1. _____
 2. _____
 Relevant Patient Data
 _____ years since diagnosis of _____
 Relevant Medications/Treatment:
 1. _____ in use since ___/___/___ discontinued since ___/___/___
 2. _____ in use since ___/___/___ discontinued since ___/___/___
 3. _____ in use since ___/___/___ discontinued since ___/___/___
 Relevant Investigations & Procedures:
 1. _____
 2. _____
 Other Relevant Information: _____

PLEASE COMPLETE BOX BELOW & FAX BACK TO:

APPOINTMENT INFORMATION

Appointment Date: ___/___/___ (yy/mm/dd) Time: _____ a.m. p.m.
 Special Instructions to Patient:
 bring health card bring diagnostic reports/results bring medications bring X-rays
 other: _____
 We have informed the patient of appointment : Yes No, please advise patient

Thank you.
 Referral Faxed on: ___/___/___ Patient has been informed of appointment

Research and Education

- Provide research that demonstrates the safety of chiropractic care and outcomes with spinal manipulation for back and neck pain.



Chiropractic Education

Basic Science/Pre-Clinical Comparison

| Chiropractic Hours* | Subjects | Medical Hours** |
|---------------------|--|-----------------|
| 366.4 | Anatomy/Embryology | 184.6 |
| 120.0 | Biochemistry | 108.4 |
| 197.0 | Microbiology/Public health/Biostatistics | 155.3 |
| 105.9 | Cell Biology/Histology | 130.7 |
| 312.8 | Physical Diagnosis/Clinical Medicine | 200.5 |
| 141.4 | Neuroscience | 114.0 |
| 561.2 | Physiology/Pathology | 542.3 |
| 66.7 | Nutrition | 21.5 |
| 29.4 | Pharmacology | 99.0 |
| 1,900.8 | Total Hours | 1,556.3 |

- You should inform the doctors of your undergraduate education and your chiropractic training, including board certification.

Affordable Care Act Mandates

- The Patient Protection and Affordable Care Act of 2010 mandates a national comparative outcomes research project agenda for pragmatic and clinical trials that provide optimal evidence-based medicine.
- *Otolaryngol Head Neck Surg* October 2011 vol. 145 no. 4 526-529

- Do you have the health care reform window of opportunity wide open?



What will you do with your opportunity to integrate chiropractic services into the coordinated care organizations?



Thank
You