



3rd Annual Strategic Summit

February 4, 2012

Richmond, VA

The Unified VCA's Vision

A state of wellness through Chiropractic care with fair and equal access for the public we serve.

The Unified VCA's Mission

Unified in promoting the health and well being of the public through education, advancement and protection of the practice of Chiropractic.

Dr. Thomas J. Wetzen, Unified VCA President, called the meeting to order at 10:30 a.m.

Dr. Wetzen asked Immediate Past President Dr. Brad Robinson to read the Statement of Professional Identity that the general membership adopted during the process of VCA/VSC unification in 2009. Dr. Wetzen set forth the rules and etiquette guidelines for the planning participants and introductions were made.

Attendees

The participants included a diverse mix of brand new and more seasoned practitioners and doctors representing a variety of practice styles and philosophies. A combination of current board members, past leadership, and both new and long-time general members from throughout the Commonwealth of Virginia helped to ensure good membership representation.

Jeff Bowers, DC
 Logan Brooke, DC
 Jeremy Busch, DC
 Julie Connolly
 Doug Cox, DC
 Karen DeYoung, DC
 David Dolberg, DC
 Sandy Elbaum, DC
 Joe Foley, DC
 Tess Graf, DC
 Jay Greenstein, DC
 Nelson Gregory, DC
 Mark Gutekunst, DC
 Shaun Jackson, DC
 Bruce Keeney, DC,
 The Keeney Group
 Bob Leib, DC
 Becky MacKenzie, DC
 Katrina Mayes, DC
 Bibhu Misra, DC
 Merri Oudt, DC
 Bob Pinto, DC
 Mike Placide, DC

Fredericksburg
 Blacksburg
 Front Royal
 Afton
 Charlottesville
 Alexandria
 Springfield
 Chester
 Salem
 Chester
 Ft Washington, MD
 Richmond
 Chesapeake
 Virginia Beach

 Richmond
 Virginia Beach
 South Hill
 Chester
 Ashburn
 Winchester
 Williamsburg
 Midlothian

Marilyn Porras, ChiroCenters
 Mgmt Corp
 Brad Robinson, DC
 Matthew Schrier, DC
 Catherine Sears, DC
 Daniel Shaye, DC, A Trusted
 Voice
 Will Sonak, DC
 Tom Tauer, DC
 Speros Tryphonas, DC
 Kevin Walsh, DC
 Bill Ward, DC
 Tom Wetzen, DC

Chesterfield
 Norfolk
 Keysville
 Portsmouth

 Williamsburg
 Sterling
 Richmond
 Virginia Beach
 Williamsburg
 Fredericksburg
 Falls Church

S.W.O.T.

Dr. Wetzen reviewed last year's "SWOT" exercise that identified some of the association's strengths, weaknesses, opportunities and threats -- factors that are important to keep in mind during strategic planning. The group then discussed updates to those four areas:

Association Strengths

- Diversity
- Common goal
- Single voice
- Strong patient support
- Increasing membership
- Leadership
- Well-organized
- Talent/Innovation/Knowledge
- Good legal and legislative consultants
- Passion/desire
- Increasing member involvement
- Strong mutual respect



- The SWOT itself
- Adaptability
- A maturing profession and membership
- Geographical location (proximity to ACA, ICA, the Nation's Capitol)
- Good relationships with other state chiropractic associations
- Watches Virginia DCs' backs
- Communications/information dissemination (vcadoctalk, Member FYI, etc.)
- Follow-through
- State scope of practice
- Corporate sponsor support
- Momentum
- Growing more pro-active, as opposed to re-active
- Staff - *New*



Bruce Keeney, Unified VCA Lobbyist, provides legislative overview

- Insufficient marketing/branding
- Not enough members participating on vcadoctalk
- Not pro-actively involved in research
- Insufficient development of key contacts with legislators
- Inconsistent communications with non-members
- Not taking full advantage of social networking tools
- Internal apathy
- Lack of district awareness - *New*
- Insufficient support of new docs - *New*
- Insufficient efforts to reach out to chiropractic colleges - *New*
- Lack of integration into public healthcare system - *New*
- Low response to association surveys - *New*
- Lack of understanding about healthcare reform issues - *New*

The attendees voted to remove "infighting/lack of respect" from the list. While an individual might demonstrate this weakness on occasion, the group felt it no longer needed to be considered an association weakness.

The group felt that the strengths identified last year have only become stronger. "Staff" was added to the list.

Association Weaknesses

- DCs' lack of awareness re: what association does for its members
- No formal CA program
- Lack of resources
 - Money
 - Manpower
 - Staff
 - Volunteers
- Poorly understood by public/public ignorance
- Varying public awareness
- *Tendency toward member infighting/lack of respect (is improving; less an issue than a year ago)*
- Low DC self-esteem
- Low membership involvement/lack of support/apathy
- Poor/inconsistent use of list-serve
- Not that many past accomplishments
- Minority of licensed DCs in state are members
- Lack of collaboration with other groups (attorneys, other healthcare providers, etc.)
- Inefficient inter-profession cooperation



Opportunities for the Association

- Patient support/advocacy
- Create new value/awareness that association offers something for everyone
- Increased sophistication of patient base
- Increased legislative strength
- Room for growth
- Technology/communications
- Improve public awareness of benefits of chiropractic (lifestyle care, wellness, etc.)... Education and training... Promote the wellness model
- Learn from other states
- State exchanges
- Increase alliances with national associations, state associations, other groups
- Grow membership by increasing outreach to students, new grads, and new licensees
- Virginia C-PAC
- Social networking
- Endowment program
- Ability to do sports physicals - *New*
- Increased representation - *New*

The group felt that increased representation on the state level is an opportunity for the association, although there are different opinions on whether this would be best achieved via increasing the number of DC representatives on the Board of Medicine or via a separate Chiropractic Board.

Threats for the Association

- External apathy
- Economy
- Dwindling insurance coverage, protections... TPAs
- Government interference
- *Zero* Low clout

- Negative PR
- Losing our identity (to PTs, DOs)
- Healthcare reform – the big unknown
- Lack of trust
- Cultural authority perceptions

The group agreed that the association has a long way to go to achieve the level of clout we need; however, it was felt that “low clout” was more accurate these days than “zero.”

Break-Outs

The participants then broke into five groups to brainstorm how to continue to build on the momentum started with the preceding strategy meetings. The five break-outs consisted of:

Topic	Facilitator
Insurance	Dr. Bibhu Misra
Membership	Dr. David Dolberg
Public Relations	Dr. Logan Brooke
Legislation	Dr. Joe Foley
Practice Management	Dr. Bob Leib



Insurance

The previous strategy meetings named “improving the insurance environment” and “resolving workers comp issues” as top needs under “Insurance.” Consistent with this, the 2012 break-outs focused on:

1. IPN
 - Continued Development
2. ASHN
 - Aetna PAR Provider clarification
 - Illusory Benefit (via legislature, BOI, and/or AG)
 - Market Conduct with Respect to



3. Physician Recruitment
3. Workman’s Compensation
 - Seek paths to get carriers to recognize and accept DCs on WC panels
 - Provide classes on what WC carriers are looking for (proper documentation, establishing care plans, using assessment tools, etc.)
4. Dry Needling
 - Explore feasibility of new code
 - Research creation of Acupuncture paths as possible model path
5. Optum/ACN
 - Consumer portal issue

Membership

The group retained the position that growing the membership must be top priority -- and that this is achieved through three primary means: recruiting more new members, retaining more existing members, and increasing member value. As Unified VCA treasurer Dr. David Dolberg observed, “Membership is the fuel that allows all the other initiatives to operate.”

1. Increase District Meetings: The most effective and efficient way we can increase membership value and support recruitment and retention efforts is by holding district meetings to increase our grass roots presence and improve communications with members. The two recent series of IPN meetings around the state have demonstrated this fact -- but we need to do more.
2. Membership Recruitment:
 - We can improve our targeting and have a more accurate picture of marketplace penetration by looking at the list of licensed DCs we receive from the Department of Health Professions and determining which are actually in practice and which are not.
 - Develop a concise new member recruiting package in a convenient section of the web site that makes it easier for members to encourage



their colleagues to join.

- Increase recognition of member sponsors.
3. Membership Retention:
 - Even if we continue to produce membership certificates upon request for subsequent years, send one out to each new member when he/she joins.
 - Even if the member is on EZ-Pay, recognize his/her continuing support in the new year.
 - Encourage a sense of pride in renewal.
 4. Use CAs to strengthen membership via ties to office.
 - Continue to expand CA training programs.
 - Explore development of a CA Member category.

Legislation

1. Raise our clout.
 - Virginia C-PAC.
 - Grassroots training at district meetings.
 - Finetune legislative hand-out and create greater awareness of it.
2. Pursue Co-Pay legislation.
 - Interact with other health providers.
 - Use our legislative lobby.
3. Raise \$100,000 for Virginia C-PAC.
4. Improve Legislative Committee organization.

We will continue to monitor and look for opportunities to advance items from previous planning sessions, including physician status, protection of the adjustment, and increased BOM representation.



Public Relations

1. Work jointly with Membership Committee.
2. Create AV presentations directed to legislators.
3. Assemble a database of information to help members respond to negative media.
4. Continue efforts to remove barrier for DCs to conduct pre-participation physicals for student athletes.
5. Create six new Celebrate Wellness editorial pieces
6. Create audio-visual versions of Celebrate Wellness for members to use as presentations.

Practice Management

1. Mentoring Program: Provide member doctors -- both new docs and those who have been around but want help -- with support via other member doctors who volunteer to serve as mentors.
2. New Doc's Resource Center: Develop a password-protected section of the web site tailored to answering new doctors' FAQs, providing helpful checklists, sample forms, etc.
3. Help doctors find options for personal and practice insurance.
4. Develop tools to help doctors with pension and savings programs.
5. Help Virginia DCs to cultivate an image of practice success.

Next Steps

The strategy meeting initiatives will help shape corresponding committee focus in the coming year. Cloud-based project management sheets will be utilized to track progress, share updates, and strengthen accountability.

Dr. Wetzen stressed the importance of treating the plan as "a living and working document. We will review it at Board Meetings, provide regular updates, and solicit the membership for ongoing input and feedback. The strategic plan belongs to the members."

Dr. Wetzen adjourned the meeting at approximately 3:30 p.m.

Get Involved!

If you would like to participate on a Unified VCA committee and help with these initiatives and others, please contact the committee chair listed below.

Education: Dr. Anna Bender, dr.anna@atleechiropractic.com

Insurance: Dr. Bibhu Misra, drmisra@theomcenter.com

Legislative: Dr. Bill Thesier, bill@thesierchiropractic.hrcoxmail.com or Dr. Joe Foley, bonesdc@aol.com

Membership: Dr. Lonnie Slone, slonechiro@aol.com

Philosophy/Ethics: Dr. Lee Matthis, lmatthis@tuckclinic.com

Practice Management: Dr. Bob Leib, askdrbobdc@aol.com

Public Relations: Dr. Logan Brooke, lbrooke@tuckclinic.com

Web Site: Dr. Matthew Schrier, mschrierdc@communitychiroplc.com

For a complete committee listing, visit "About VCA" at www.virginiachiropractic.org.