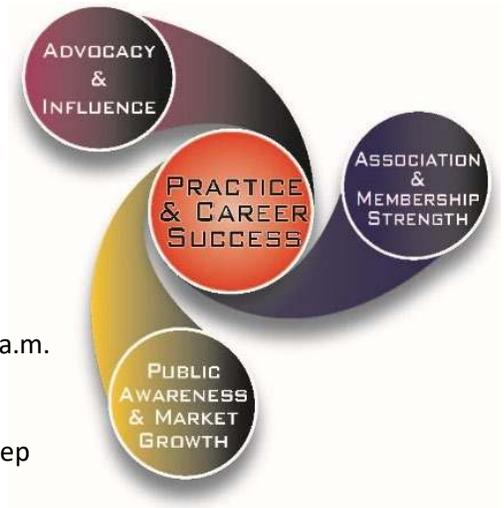


UVCA 2022 Strategic Planning Meeting

Saturday, February 5, 2022

Embassy Suites by Hilton Richmond



REPORT

Dr. Michelle Rose, UVCA President, called the meeting to order at 10:35 a.m.

The following were in attendance.

Carlsen, DC, Eric	Board Member (District Director), CAC Rep
Connolly, FICC, Julie	Executive Director
del Mar A Villar-Villar, Maria	Member Services Associate
Fallwell, DC, Christine	Board Member (District Director)
Foley, DC, Joe	Legislative Committee Chair, C-PAC Board
Keegan, DC, Shawn	Board Member (District Director)
Keeney, Bo	Lobbyist, The Keeney Group
Mulvaney, DC, Michael	Education Committee Co-Chair
Myers, DC, Taylor	Board Member (Treasurer)
Perron, DC, Chris	Board Member (Immediate Past President)
Pinto, DC, Bob	Board Member (Vice President)
Rathmann, DC, Jennifer	Current Chiropractic Representative to the Virginia Board of Medicine, Past Board Member (District Director)
Robinson, DC, Brad	Past President, Current Virginia CPAC Chair
Rose, DC, Michelle	Board Member (President, Strategic Plan Champion)
Sonak, DC, Will	Past Board Member (Secretary)
Stewart, DC, Christine	Board Member (District Director)
Swift, DC, Carly	Board Member (Secretary), Public Relations Committee Chair
Trochim, DC, Aaron	Board Member (District Director)
Walsh, DC, Kevin	Current Awards Chair, Past Board Member (District Director)
Wetzen, DC, Tom	Past President, Current ChiroCongress Board Member

Dr. Rose facilitated attendee introductions and provided orientation for the day's activities.

Gamification was employed to add a little fun to advance preparations. Winners were Dr. Chris Perron, Dr. Christine Fallwell, and Dr. Will Sonak.

Scope of Practice

Dr. Chris Perron discussed the Scope of Practice Task Force's desire to fortify chiropractic's scope of practice in Virginia. Dr. Perron, Dr. Rathmann, and Mr. Keeney provided historical perspective on the issue and outlined the various mechanisms available to address scope-related issues. The group reiterated that the goal is not to expand services but codify existing.

Future of Chiropractic National Strategic Planning Project

Dr. Tom Wetzen briefed the group on the national Future of Chiropractic strategic planning project. He outlined primary goals and progress. Attendees expressed excitement over the chance to realize a true national long-range vision that can bring together and benefit all DCs throughout the country. The UVCA donated a total of \$6000 to the project in 2021 and will consider additional contributions at the upcoming Board Meeting.

The attendees liked the Future of Chiropractic's tagline, **Unity Without Uniformity**. It was felt that the UVCA may be able to reinforce this theme in its own long range planning communications for added impact to the benefit of both organizations.

Member Survey

As attendees had lunch, Ms. Connolly provided highlights from the January 2022 membership survey.

- Response rate was about 9% of UVCA DC members.
- There was a good cross-section of doctors in terms of how long they've been in practice in Virginia.
 - 11% have been in practice for less than 4 years.
 - 16% have been in practice for 5-10 years.
 - 24% have been in practice for 11-20 years.
 - 33% have been in practice for 21-30 years.
 - 16% have been in practice for more than 30 years.
- 41% of the respondents practiced in another state before Virginia.
- There was diversity in the respondents' membership history. 16% have been members for less than 4 years, 22% for 5-10 years, 37% for 11-20 years, 16% for 21-30 years, and 19% for 31 years or more.

The survey asked members about 32 UVCA member benefits: how important each benefit was to respondents, how aware of each benefit the respondents were, and how well the respondents felt that the UVCA is delivering each benefit. The chart below summarizes the benefits that emerged as most important, with the greatest awareness, and that are delivered best by the association. The group discussed what these results may suggest.

From January 2022 UVCA Member Survey		
In Descending Order		
<u>Awareness</u>	<u>Importance</u>	<u>How Well UVCA Delivers</u>
1. VCA doctalk	1. Help with compliance, laws, regs.	1. Conventions, seminars, webinars
2. Conventions, seminars, webinars	2. Conventions, seminars, webinars	2. VCA doctalk
3. Free classified listings	3. Advocacy/legislative activities	3. Free classified listings
4. Camaraderie	4. CEU discounts	4. Insurance Tips
5. Advocacy/legislative activities	5. Billing, coding, doc. support	5. Advocacy/Legislative activities
6. Help with compliance, laws, regs.	6. VCA doctalk	6. Camaraderie
		<i>TIED WITH</i>
		CEU discounts
7. Billing, coding, doc. support	7. Camaraderie	7. Billing, coding, doc. support
8. Insurance Tips	8. Insurance Tips	8. Help with compliance, laws, regs.
	<i>TIED WITH</i>	
	Insurance issues help	
9. Newsletter	9. Free classified listings	9. Newsletter
10. Opps. for leadership/involvement	10. Find-a-Doc	10. Insurance issues helps
11. Insurance issues help	11. F4CP group membership	11. Opps. for leadership/involvement
	<i>TIED WITH</i>	
	Social media content/campaigns	

Julie also summarized recent data analysis and survey responses regarding UVCA Insurance Tips. She shared that the open rates for the e-blasts of the last dozen titles by both members and non-members ranged from 19 to 39%. She pointed out the Tips appears in the list of benefits the members are most aware of, consider most important, and feel that the UVCA does well. Some attendees suggested that some respondents may not have realized that "Insurance Tips" referred to the quarterly publications that Dale Jackson has developed for us; that they may be thinking of the miscellaneous pieces of information we send out to members regarding wide-ranging insurance topics via VCA doctalk, the newsletter, and e-blasts, *as well as* the official Insurance Tips.

The survey solicited suggestions for insurance, cash, or practice-related topics that members would like to see the UVCA cover in a 2022 Insurance or Practice tip. The requested topics follow without consolidation.

Coding, Billing, and Documentation

- Insurance coding - common denial reasons and solutions
- Updates on new codes, modifiers, and billing for therapies
- Billing
- Documentation compliance
- Documentation requirements
- How to document chronic "wellness" care to justify insurance billing/medical necessity
- Proper coding
- How to solve issues with billing and collecting
- How doctors manage their daily tx notes, initial reports, and interims (written or dictation?)
- Review of ICD 10 diagnoses
- How our notes can help/hurt us in court
- How to ensure we are effectively documenting the standard of care

Insurance

- Any insurance training for the billing department/staff person
- Insurance
- How to negotiate fees with insurance companies
- How to handle insurance companies' denials for valid services provided such as re-exams, modalities for chronic recurrent conditions, massage therapy and spinal manipulation
- How to deal with insurance companies denying exams
- When to release patients from medically necessary care with chronic conditions
- What can we write off?
- Anthem: proper coding of 97140 in various scenarios, NPI mix up, how to get Anthem to reprocess mistakes correctly

Cash Practice

- Cash
- How to convert to a cash practice
- Anything related to cash practice
- Migrating from insurance to all cash practice
- Dealing with Medicare patients and ABNs in a cash practice

Medicare

- Medicare changes
- Medicare Made Easy [*reference to 8-hour in-person seminars consultant Susan McClelland used to do for us regularly*]
- Dealing with Medicare patients and ABNs in a cash practice

Communicating Value

- The 3rd party payment system is killing me. Considering getting out of the profession even though I love it. It's the conundrum, "I'm already paying \$X for my insurance, why do I have to pay you, too? It's supposed to cover my healthcare." It's an ineffectual system and, though many come in and pay cash for service, many others are lost, don't start care, or go to The Joint. They shop for the cheapest."
- Interprofessional communication in manners that aren't trying to prove ourselves "right" but sharing where we are
- Prescribing care based on patient needs, NOT insurance reimbursement

Profitability

- Increasing revenue and lowering A/R
- Smart ways to save money with payroll
- Collections

VA

- How to process authorization for further care of Veteran Administration patients
- How to improve VA referrals and payments
- How to get a job in VA facilities

Chiropractic Office Staffing/HR

- Salaries vs production standards
- Smart ways to save money with payroll

Integrated Settings

- Chiropractic in integrated settings
- How to get a job in VA facilities, hospitals, CHCs

Other Topics Mentioned

- Medical Marijuana (collaboration with dispensaries)
- Diagnostics (more training related to functional neurology and MRI interpretation for spine and extremities)
- Patient Populations (caring for LGBTQ patients)
- Social Media

Mission & Vision

The group reviewed the association's vision and mission, which are integral to all long-range planning.

The Unified VCA's Vision: Chiropractic positioned as a highly regarded health care profession that improves and advances public health and well-being.

The Unified VCA's Mission: Helping Doctors of Chiropractic deliver exceptional care.

SWOT Updates

Dr. Rose presented the results of the last SWOT exercise that was conducted in 2017 and asked for updates and changes from the attendees. The updated lists of internal UVCA Strengths and Weaknesses and external Opportunities for the UVCA and Threats for the UVCA appear below.

S.W.O.T.
Strengths – Weaknesses – Opportunities - Threats
 Updates of 2/5/2022 Noted in Red

INTERNAL

Unified VCA
Strengths

The following internal factors are helpful to the Association.

- Diversity (philosophical, practice style)
- Common goal
- Single voice
- Strong patient support
- Stable membership (maintained, even grew slightly, during pandemic)
- Good leadership
- Well-organized/efficient
- Talent/innovation/knowledge (helping doctors navigate COVID)
- Good legal consultants
- Good legislative consultants
- Passion/desire
- Increasing member involvement
- Strong mutual respect
- Annual strategic planning, SWOT exercise
- Adaptability
- A maturing profession & membership
- Geographical location (proximity to ACA, ICA, Nation's Capital)
- Good relationships with other state & national chiropractic associations
- Watches Virginia DCs' backs
- Communications/information
- Follow-through
- State scope of practice (both a strength and a weakness)
- Corporate sponsor support
- Momentum
- Growing more pro-active; not just re-active
- Staff
- Above average retention rate
- Increasing/improving list-serve participation
- Vendors feel welcome/part of group
- Educational programs, conventions (relevant, diverse, quality) (strong attendance)
- Strong representative on BOM
- Growing legislative relationships (still need to be much stronger, but moving in right direction)
- Connections within insurance industry/MCOs
- Member enthusiasm
- Provides a unique product
- ECA-IPN (continued collaboration with other state members)
- New affinity program with SecureCare

Unified VCA
Weaknesses

The following internal factors are harmful to the Association.

- DCs' lack of awareness re: what association does for them
- No formal CA program
- Although improving, limited resources
- Money
- Manpower (staff, volunteers)
- Poor/varying public awareness
- Low DC self-esteem
- Apathy: low membership involvement/support
- Insufficient member use of existing UVCA tools & benefits
- Poor/inconsistent use of list-serve (but improving)
- Insufficient awareness/promotion of accomplishments
- Only about half actively practicing DCs in state are members
- Lack of collaboration with other groups (attorneys, other healthcare providers, etc.)
- Inefficient inter-profession cooperation
- Insufficient marketing/branding
- Not pro-actively involved in research
- Incomplete key legislative contact network
- Inconsistent communications with non-members
- Lack of district awareness
- Insufficient communication of support for new docs (improving!)
- Little presence at chiropractic colleges
- Lack of understanding about healthcare reform issues
- Low committee participation
- Lack of doctors' awareness/understanding about compliance, documentation
- Low Virginia C-PAC Contributions
- Low member participation in legislative activities
- State scope of practice (both a strength and a weakness)
- No specific timelines affixed to goals and initiatives
- Outdated communications technology
- Lack of race, ethnic diversity

S.W.O.T.

Strengths – Weaknesses – Opportunities - Threats

Updates of 2/5/2022 Noted in Red

EXTERNAL

Opportunities for the Unified VCA

The following external opportunities are helpful to the Association.

- Patient support/advocacy
- Membership support/advocacy
- Increased value/awareness that UVCA offers something for everyone
- Increased legislative strength
- Technology/communications
- Improve public awareness of chiropractic benefits (lifestyle care, wellness model, etc.)
- Learn from other states
- Increase alliances with national & state associations, other groups
- Increase outreach to students, new grads, & new licensees
- Virginia C-PAC
- Social networking
- Endowment program
- Sports physicals
- Increased representation
- Workers Comp
- **SecureCare affinity program**
- **Continued collaboration with ECA-IPN partners**
- Increased media coverage/awareness of Chiropractic
- Improved profession self-esteem
- Economic value of Chiropractic
- Insights from probe review - **DONE**
- Vendor involvement
- Healthcare reform (provider specific)
- Unique product
- Referrals by other healthcare providers
- Baby boomers have the most disposable income, represent good prospects for cash &/or wellness based practices with less dependence on insurance
- VA (with national associations taking the lead)
- F4CP tools and resources
- Growing body of research supporting Chiropractic
- DOT physicals - **DONE**
- **Opioid crisis - educate providers and patients how chiropractic can help**

Threats to the Unified VCA

The following external threats are harmful to the Association.

- **The pandemic**
- **Non-members**
- External apathy
- Economy
- Dwindling insurance coverage, protections... TPAs (note: not as big a threat as more patients move to cash and/or wellness models)
- Government interference
- Insufficient legislative clout
- Lack of integration into public healthcare system
- Negative PR
- Losing our identity (to PTs, DOs)
- Healthcare reform
- Lack of inter-professional trust
- Cultural authority perceptions
- Audit/recoupment process
- Lack of national vision
- Other chiropractic organizations interfering with Virginia scope, regs, etc.
- Medicare: Probe Review, OIG
- **Over-regulation**

Note: Most of the items above relate back to issues of perception; awareness; public relations. At the 2017 strategy meeting, Dr. Jay Greenstein also observed that, "One of the more interesting points that was brought up was the issue of belief." Dr. Greenstein explained, "When a patient goes to a chiropractor and has a bad experience, the patient then says I don't "believe" in chiropractic. However when they have a bad experience with their local plumber, I'm sure they don't say "I don't believe in plumbing!" We had some great discussion around the fact that Chiropractic is not a belief system, it's an evidence-based profession. And we need to let the public know that."

The Strategic Plan Review

The group reviewed the key strategic plan goals, strategies, and projects. They looked at progress that has been made since the last meeting and brainstormed ideas to move progress forward.

Goal 1: Advocacy & Influence

Strategy 1: Strengthen C-PAC

Description: Promote C-PAC, educate members as to its purpose, necessity, and how they can help.

Progress:

- Developed list of CPAC achievements.
- Promoted the importance of and supporting CPAC more strongly at conventions, with emphasis on recurring donations.
- Added QR code to contributor form.
- Included regularly in District Connection agendas.
- Filmed short interviews of doctors about the importance of CPAC.
- Included an article about CPAC by Chair Dr. Robinson in The Virginia Voice.
- Published a blog featuring President Dr. Rose on the relevance and importance of CPAC.
- Increased number of contributors to 77.

Next Steps:

- Develop talking points to help leadership promote CPAC, solicit contributions, and handle typical objections. Hold Zoom meetings with district directors to train/support.
- Have CPAC Chair conduct a Zoom meeting with leadership and/or members.
- Determine how to use the CPAC videos and implement. (Maria and Dr. Foley will meet to discuss.)

Strategy 2: Defend Chiropractic Scope

Description: Fortify chiropractic scope of practice in Virginia. Enhance legislation.

Progress:

- Conducted an updated review of other states' scope.
- Confirmed focus to fortify, not change or expand.
- Surveyed members to develop list of services.
- Worked with lobbyist to develop list of what is/isn't in code.
- Added full board to this work group, led by Immediate Past President Dr. Chris Perron.

Next Steps:

- Update guide to meeting/meeting with legislators.
- Explore idea of DC survey to identify top 5 services.
- Determine if any vulnerabilities related to those top 5 services.
- If scope could be further strengthened to support those services, work with legislative consultants to determine best approaches/strategies (regulatory, guidance, etc.).

Related Discussions

The association's campaign to support HB 2654, the Medicare Modernization bill, will continue.

Goal 2: Practice & Career Success / Public Awareness & Market Growth

Strategy 1: Provide a Valuable Website

Description: Develop toolkits, create the “VCA Vault.”

Progress:

- Re-designed and reorganized website to make more user friendly.
- Expanded materials for new practitioners.
- Expanded materials regarding various career paths, exit strategies.
- Solicited/collected practice management videos from practice management consultants.
- UVCA was approved to present at WCRI convention, but convention as cancelled due to COVID.

Next Steps:

- Complete AMS migration so can launch new website.
- Develop communications strategies to help members learn how to use new website.
- Continue to nurture relationships through the WCRI. Apply again to present at convention once they are meeting in person again. Dr. Mulvaney will attend WCRI quarterly meetings.

Strategy 2: Create Public Awareness

Description: Conduct PR campaigns, provide tools to members for their own PR efforts.

Progress:

- Major focus has been on educating members about COVID and providing them with tools to help communicate with patients and public on related issues (essential workers, telehealth, mandates, etc.).
- Traditional annual school supplies drive has been put on hold as the pandemic created issues with logistics in the school districts.
- Since pandemic started, have conducted a successful virtual Food Drive and Make-a-Wish campaign. Also conducted a virtual silent auction.
- Continued to use e-blasts and conventions to increase awareness and utilization of extensive benefits through the UVCA’s group membership in the Foundation for Chiropractic Progress.

Next Steps:

- Decide on whether doing a silent auction, other PR activities in 2022. If want to pursue idea of a race, speak with Josh Gilbert and his wife Gina who do races through Mountain Junkies or Kent Greenawalt with Foot Levelers about the Blue Ridge race they do each year.
- Record a short video to encourage and make it easier for members to use Foundation resources/campaigns.

Strategy 3: Help New DCs Getting info Business

Progress:

- Developed new web content on various career paths, new DC checklist, new DC guide from NCMIC, etc.
- Updated database so can more easily identify new practitioners for targeting.
- Did direct mail specifically targeting new DCs to increase awareness of relevant UVCA benefits.
- UVCA staff researched other organizations’ mentor programs and drafted one for the UVCA.

Next Steps:

- Launch new website and use to further highlight content for new docs.

- Develop mentor program further. Consider non-member mentee as a recruitment tool; pairing new licensee with doctor looking to retire. Dr. Trochim and Dr. Myers volunteered to spearhead this project.
- Explore a limited number of convention “scholarships” to member and non-member new DCs to expose them to the benefits of membership, facilitate engagement, and build camaraderie.
- Consider reviving “Nuts & Bolts” seminars, perhaps convert to online.

Strategy 4: Support ECA-IPN

Progress:

- The UVCA is participating via an affinity program directly with SecureCare, rather than working with SecureCare through the ECA-IPN. Members have been informed.
- UVCA website has been updated to reflect changes.
- The ECA-IPN will remain in-tact so that we can continue to benefit from the collaboration with the other two states, Maryland, and Pennsylvania, as opportunities arise.
- Dr. Bob Pinto was appointed board liaison to SecureCare.

Next Steps:

- Work with new SecureCare director Bharon Hoag to improve communications, identify and explore opportunities.
- Set up meeting so that SecureCare can brief the Board.

Related Discussions

- Dr. Swift relayed what has worked well for her in increased direct referrals. She sends a letter of introduction to OBGYNs 3-5 times. The group discussed how we could have Dr. Swift record a short tutorial video on doing this, or we could include it as a topic in convention roundtables. We could develop templates and talking points to help doctors convey a consistent message. Could also be used with groups such as pain management doctors.
- The attendees also talked about the importance of making contacts with hospital associations, groups such as Sentara and Inova, etc. We could have a pre-recorded Zoom presentation that we can send out, that will end with a list of DC members in that area. Perhaps could develop a series of short presentations by a UVCA “speakers bureau” that could be offered to groups like Sentara.

Goal 3: Association & Membership Strength

Strategy 1: Develop, Enhance Leadership

Progress:

- Amended bylaws to reduce size of board for added efficiency, in accordance with association best practices.
- Set up specific time slot at convention for doctors with leadership interest to meet with president.
- Developed new leadership manual for board.
- Scheduled annual leadership training.

Next Steps:

- Continue/build on the above.

Strategy 2: UVCA Branding

Progress:

- Designed new logo and integrated into corporate identity.

- Designed and reorganized website.
- Developed materials to communicate value to specific populations such as Associate DCs and Out-of-State DCs.

Next Steps:

- Launch new website.
- Enhance communications re: how UVCA membership increases a doctor's income, saves him or her money.

Strategy 3: Increase Resources & Revenue

Progress:

- Affinity Programs: Added individual health insurance to group plans and new affinity programs with Infinedi, ChiroUp, ChiroCode, and Computer Troubleshooters. Quartermaster Tax Management Services discontinued affinity program with the UVCA.
- Budget, Audits: Expanded distribution of monthly financial reports to full board to increase all board members' awareness and understanding. Obtained recommendations from accountant re: audits. Obtained recommendations and price quotes from several auditing firms.
- Significantly expanded and implemented new member onboarding program.
- Discussing partnering with the MCA on its CA training program and UVCA's rad tech training program.

Next Steps:

- Continue to seek out new affinity programs. Explore program with FullScript further.
- Select auditing firm to conduct full association audit by the end of 2022.
- Incorporate texting into new member onboarding program, in addition to email and a small amount of mail. Fully automate as soon as new AMS is up and running.
- Continue discussions with MCA regarding CA and RT programs.

Related Discussions

One of the outcomes from previous strategy meetings was the implementation of a more comprehensive new member onboarding program, which will be fully automated in the new AMS. The group brainstormed further improvements including more texting and ways to encourage district directors to call new members in their area.

Closing Notes

Dr. Kevin Walsh was the winner of the on-site participation game.

The leadership will now:

- Determine the top initiatives to focus on in the coming year,
- Outline longer term priorities to be refined at subsequent meetings,
- Identify project groups, leads, assignments, and timelines.

The Strategic Planning Meeting adjourned at 3:45 p.m.