

KPI's for Doctors of Chiropractic

Operations Resource

Case Management

- Distribution of case types >25% CC, increasing over Time
- Completion of CC cases >80%, AS at 95%, others at 85%
- Pre-scheduled programs of care: 2 weeks out is 75% or more of average volume, 4 weeks out is 50% of average volume
- NP volume: <10=stagnation or shrinking, 10-15=mild growth, 15-20=moderate growth, >20=robust growth
- NP referrals from existing patients. Per 100 visits: <1=F, 1-2=D, 2-3=C, 3-4=B, >4=A
- Distribution of NP referral sources. Ideal is 1/3 each from existing or past patients, referral partners, and all other sources, both print and electronic marketing.
- Distribution of payer types: 15-20% combined workers comp and MVA is ideal.
- Annual growth of NP, ov, services and collections: smaller practices: >20% growth=A, medium sized practices>15%, larger practices>10%=A.

Financials

- Fixed overhead (not counting licensed or credentialed employees or primary doctor comp): <30%=A, <35%=B, <40%=C, <45%=D, >45%=F. Regional variations regarding wage costs and occupancy costs will skew these numbers.
- Variable overhead: 30% or less =A, 30-35%=B, 35-40%=C, 40-45%=D, >45%=F
- Case average billing: \$2700 is national DC average
- Cost of routine ov: <\$20=A, \$20-25=B, \$25-30=C, \$30-35=D, >\$35=F
- Margin for variable expense employees: 20-25%=A, 15-20%=B, 10-15%=C, <10%=F
- Net-net margin for entire practice >\$20K/mo=A, \$15-20/mo=B, \$10-15K/mo=C, \$5-\$10/mo=D, <\$5K/mo=F
- AR: <75% of average services=A, 75-100%=B, 100-125%=C, 125-150%=D, >150%=F. Skewed by third party cases, other slow payers.
- Delinquent AR: <15% of total AR=A, 15-25%=B, 25-35%=C, 35-45%=D, >45%=F. Skewed by third party cases, other slow payers.



HR/personnel

- Access/availability of practice: total patient treatment hours/week, number of days/week.
- Attendance: 50 full weeks worked = A
- Number of providers
- Menu of services
- Turnover per position

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