

Survey Says...

How did the responses add up in our 12th Annual Salary & Expense Survey?

Surveys are funny things. Hundreds get sent out, thousands of questions get answered, and the answers get analyzed — pretty basic, right? Yet there is a lot that goes on “behind the scenes.”

Chiropractic Economics has conducted this same salary and expense survey for the past 12 years with a few minor tweaks and question changes as the times change, and yet the results are different every time.

Granted, that is to be expected with a salary and expense survey as fees, prices and the like change; however, when it is so different from the previous year, you have to wonder why or how.

While we know the results can only reflect those who make the effort to complete it, perhaps the tough economic times of this past year had an effect on the numbers, or maybe there were overachiever respondents the previous year.

With that being said, the overall results of our 12th Annual Salary & Expense Survey show a decrease in numbers from last year, but more in line with the survey from two years ago.

This year's survey was completed by more respondents (435) than in 2008 (341), but not as many as in 2007 (575).

SIGNIFICANT FINDINGS

• **Billings and collections.** Last year, the average gross billings was \$534,596, and in 2007, it was \$423,919. This year's survey reported average gross billings of 389,387 — a 27.1 percent decrease from last year, but only an 8.1

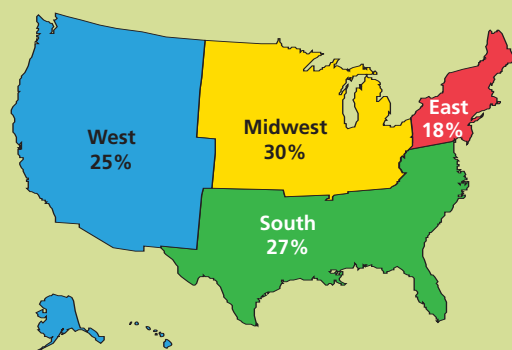
About this survey

Throughout March and April 2009, we here at *Chiropractic Economics* invited both readers and nonreaders to participate in our 12th Annual Salary & Expense Survey, a confidential Web-based questionnaire.

We extended the invitation by e-mail and through announcements in our e-newsletter and Newsflash. Additionally, we invited a number of state associations to encourage their members to participate in the survey.

We thank all that participated for their help.

- **Respondents.** A total of 435 individuals completed the survey.
- **Regional representation.** Respondents came from all areas of the United States — East, 18 percent; Midwest, 30 percent; South, 27 percent; and West, 25 percent. A number of states were not



represented in the survey: New Mexico, Vermont, New Hampshire, and Montana.

- **Statistics.** You will find reference to only averages (or means) in this year's survey. After your feedback about previous years' surveys, we made it simpler by only stating averages.

The average is the number calculated by dividing the total by the number in the set — an arithmetic average.



decrease from the previous year.

Collections saw a similar fate. Last year, the average gross collections was \$377,983, and in 2007, it was \$294,909. This year's survey reported average gross collections of 271,543 — a 28.1 percent decrease from last year, but only a 7.9 percent decrease from the previous year.

Perhaps both of these decreases are due to the recession.

- **Salary.** Respondents reported their average DC salary in 2008 to be \$111,263, and in 2007 it was \$94,116. This year the results revealed the average DC salary was \$94,454 — a decrease of 15.1 percent from last year, but a slight increase from 2007.

- **Average DC total compensation.** For unincorporated DCs, total compensation is earnings *after* tax-deductible expenses but *before* income taxes.

For DCs in a professional corporation, it is the sum of salary, bonuses, and retirement/profit-sharing contributions made on their behalf.

In 2008, respondents said they had an average total compensation of \$165,686, and in 2007, the average total compensation was \$118,709. This year, that figure was \$145,791 — a 12.0 percent decrease from last year, but a 22.8 percent increase from 2007.

3-Year Comparison of Respondent Information

PERSONAL CHARACTERISTICS	2009	2008	2007
Average age	44.9	41.9	42.0
Male	83.6%	82.1%	80.4%
Female	16.4%	17.7%	19.6%
Years in practice	16.2	13.2	13.1
Solo practitioner	70.9%	70.4%	70.5%
Group practitioner/partner	23.8%	24.9%	25.8%
Associate	3.9%	4.7%	3.7%
Franchise owner	1.4%	3.9%	2.3%
PRACTICE CHARACTERISTICS			
Suburban	59.0%	59.7%	61.8%
Urban	28.3%	26.7%	23.1%
Rural	12.7%	13.6%	15.1%
No. of employees	2.9	3.2	3.0
Hours/week in patient care	32.2	31-35	31-35
Average PVA	36.4	33.7	30.3
Average patient visits/week	110.0	120.0	100.0
Average new patients/week	5.7	5.0	4.0
INCOME COMPARISONS			
Average gross billings	\$389,387	\$534,596	\$423,919
Average gross collections	\$271,543	\$377,983	\$294,909
Average DC salary	\$94,454	\$111,263	\$94,116
Average DC total comp.	\$145,791	\$165,686	\$118,709
EXPENSES			
Advertising	\$12,604	\$14,072	\$11,015
Malpractice insurance	\$2,335	\$2,686	\$2,373
Office lease or mortgage (yr)	\$23,692	\$23,232	\$22,594

Our 'typical' respondent

Our survey appealed to a wide range of individuals, from 25 years old to 72 years old, who have been in practice for approximately one year to more than 49 years. By looking at averages, we can paint a picture of a "typical" respondent, who is:

- Male. Only 16.4 percent of respondents were female;
- 44.9 years old;
- A solo practitioner (70.9 percent); and
- Licensed in 1.5 states;

Our average respondent:

- Owns 1.1 clinics;
- Prefers to practice in the suburbs (59.0 percent);
- Employs 2.9 individuals in the clinic (1.8 of whom work full time);

- Sees 110.0 patients each week;
- Has a patient-visit average (PVA) of 36.4;
- Attracts 5.7 new patients each week; and
- Sees patients 32.2 hours a week.

This respondent:

- Has average billings of \$389,387 and collections of \$271,543 for a reimbursement rate of 69.7 percent;
- Sells products to patients for 4.07 percent of gross revenues;
- Pays his CAs \$24,430 and himself \$94,454; and
- Enjoys average total compensation of \$145,791.

Finally, this typical respondent spends \$23,692 on office leases or mortgages, \$12,605 on advertising, and \$2,335 on malpractice insurance.

Overview of 2009 Respondents

PERSONAL CHARACTERISTICS

Average age	44.9
Male	83.6%
Female	16.4%
Years in practice	16.2
Solo DC	70.9%
In a group/partnership	23.8%
Associate	3.9%
Franchise owner	1.4%
No. of state licenses	1.5

CLINIC CHARACTERISTICS

Clinics	1.1
Urban	28.3%
Suburban	59.0%
Rural	12.7%
Employees	2.9
Avg. PVA	36.4
Avg. patients/week	110.0
Avg. new patients/week	5.7
Cash practice	22.8%

SPECIALTY

General	61.6%
Family	22.7%
Sports/Rehab	8.5%
Pediatrics	1.2%
Other	6.0%

SPECIALISTS IN CLINIC

LMT	81.3%
Acupuncturist	24.5%
PT	5.8%
Nutritionist	7.7%
Trainer	3.2%
MD/DO	7.1%
Other	9.7%

INCOME

Avg. billings	\$389,387
Range	\$10K-\$3M
Avg. collections	\$271,543
Range	\$9.1K-\$2.1M
% income from retail	4.07%

AVERAGE SALARIES

Associate	\$61,719
MD/DO	\$128,666
CA	\$24,430
LMT	\$22,044
PT	\$55,000
DC	\$94,454
Total DC comp.	\$145,791

AVERAGE EXPENSES

Advertising	\$12,605
Malpractice insurance	\$2,335
Office lease/ mortgage (yr)	\$23,692

MODALITIES PROVIDED

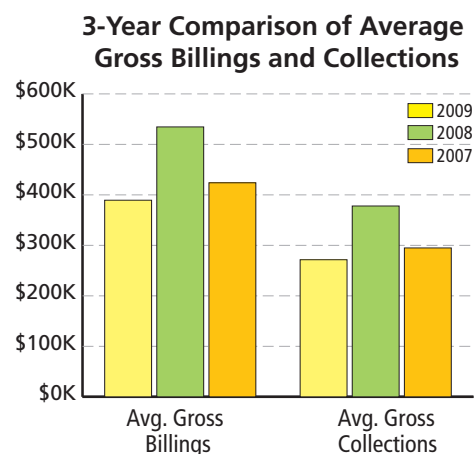
Nutrition	59.4%
PT	61.4%
Exercise	61.4%
Massage	53.8%
Weight Loss	21.8%
Acupuncture	21.8%
Homeopathy	7.9%

Let your voice be heard! Be on the lookout for your chance to participate in our upcoming Fees & Reimbursements Survey.

Average billings and collections

Both billings and collections decreased significantly from 2008, but is more on par as to what was reported the year before. In 2007, respondents reported average gross billings of \$423,919. In 2008, that number rose to \$534,596 — but decreased to \$389,387 in this year's survey.

Collections also saw a decrease compared to last year. Similar to the billings' scenario, average collections decreased from last year's numbers only to be more in line with the year before. In 2007, average gross collections were \$294,909. They increased to \$377,983 in 2008, only to decrease in 2009 to \$271,543.



DCs to MDs: How do you compare?

Are you curious to see how you compare to MDs in compensation, patient hours, and malpractice insurance premiums? Our survey found that mean average total compensation of respondents was \$145,791.

According to *Medical Economics* magazine (www.memag.com), the median total compensation of all primary-care physicians was \$187,500. (Average figures were not reported.) *Medical Economics* magazine, which conducts a survey similar to ours each year, reported its latest survey findings in its Aug. 1, 2008, issue.

To earn this median total compensation, primary-care physicians worked 46 hours per week (down from 50 hours last year) to see an average of 94 patients (also down from last year, which was 100 patients).

Although the total compensation of DCs is lower, our survey found that DCs see an average of 110 patients while working 32.2 hours per week.

In addition to working fewer hours per week, DCs also have something their MD colleagues do not — lower malpractice insurance premiums. Primary-care medical doctors pay on average \$17,500 for malpractice insurance, while DCs, on the other hand, pay only \$2,335 on average.

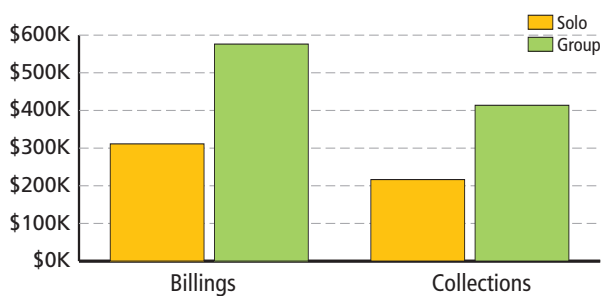
Group versus solo

One way to grow your practice is to take in partners or associates. This year's survey shows that groups or partnerships have more billings and collections than solo practices.

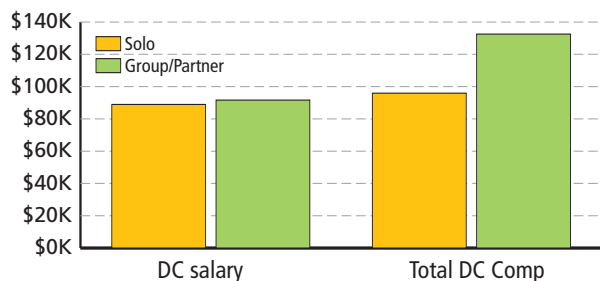
- Reported average billings for groups was \$576,349 — whereas solo practices saw average billings of \$311,277.
- Average collections for groups was \$413,701 — significantly higher than solo practices, \$216,493.

As expected, expenses for groups were higher than those for solo practices. This year we asked respondents to tell us how much they spent on advertising, on malpractice insurance, and their office lease or mortgage per year.

Solo vs. Group: Average Billings and Collections



Solo vs. Group: Average DC Compensation



Groups spent on average \$51,915 on these three major areas of business expenses, with the majority of dollars (\$37,500) spent on the office lease or mortgage. Solo practices spent \$33,791 on these three major areas of business expenses, with \$22,478 spent on the office lease or mortgage.

The average total compensation for group practitioners was reported at \$132,523, compared to \$95,924 average total compensation for solo practitioners. (*Note: Total compensation for unincorporated DCs is defined as earnings after tax-deductible expenses, but before income taxes. For DCs in a professional corporation, it is the sum of salary, bonuses, and retirement/profit-sharing contributions made on their behalf.*)

Comparison of Solo and Group Practices

CLINIC LABEL	SOLO	GROUP
Clinic	68.4%	56.8%
Wellness center	27.5%	32.4%
Medical spa	0.7%	0.0%
Rehab center	3.4%	10.8%
Franchisee	0.0%	0.0%

CLINIC STATISTICS

No. of employees	2.4	4.3
No. of FT employees	1.4	2.9
PVA	37.8	37.7
No. of patients/week	90.9	147.4
New patients/week	4.4	9.3
Cash only	23.4%	24.3%
Average billings	\$311,277	\$576,349
Average collections	\$216,493	\$413,701

COMPENSATION AND BENEFITS

Retirement	14.8%	32.6%
Healthcare benefits	35.3%	31.3%
Incentives or bonuses	46.1%	76.7%
Profit sharing	8.4%	15.5%
Paid time off	61.9%	75.3%
Average CA salary	\$23,733	\$24,093
Average LMT salary	\$21,277	\$25,545
Average DC salary	\$88,963	\$91,671
Average total DC comp.	\$95,924	\$132,523

SERVICES PROVIDED

LMT	25.4%	36.8%
Acupuncturist	6.8%	13.5%
PT	0.1%	1.9%
Other	3.2%	4.8%
Nutritionist	2.2%	4.8%
Trainer	0.1%	1.9%
MD/DO	1.3%	6.7%

EXPENSES

Advertising	\$9,242	\$11,378
Malpractice insurance	\$2,071	\$3,037
Office lease/mortgage (yr)	\$22,478	\$37,500

According to last year's survey, 40.7 percent of group DCs worked 36 or more hours per week, compared to 32.3 percent of solo practitioners.

This year's survey revealed a change. Only 31.3 percent of group DCs reported working 36 or more hours per week, while solo DCs reported 32.5 percent.

DC vs. Integrated Healthcare Clinics: Significant Comparisons

PRACTICE TYPE	INTEGRATED HEALTHCARE CLINIC	DC ONLY
Solo	68.2%	72.6%
Group/partnership	26.5%	21.9%
Franchisee	0.5%	1.9%
CLINIC LABEL		
Clinic	64.3%	66.1%
Wellness center	26.3%	28.8%
Medical spa	0.5%	0.7%
Rehab center	8.1%	4.2%
LOCATION		
Urban	29.1%	27.6%
Suburban	62.5%	56.9%
Rural	6.6%	15.3%
SPECIALTY		
General	61.3%	61.4%
Family	13.3%	25.2%
Sports/Rehab	13.3%	7.0%
Pediatrics	0.0%	1.1%
Other	9.3%	5.0%
CLINIC STATISTICS		
No. of employees	3.7	3.1
No. of FT employees	3.1	2.1
PVA	38.1	35.1
Patients per week	130.9	96.7
New patients/week	6.5	5.4
Cash only	17.9%	24.1%
EXPENSES		
Advertising	\$32,689	\$9,374
Malpractice insurance	\$2,898	\$2,276
Office lease/mortgage (yr)	\$34,260	\$25,596
COMPENSATION AND BENEFITS		
Offers retirement plan	28.9%	21.9%
Healthcare benefits	26.0%	22.6%
Offers incentives or bonuses	56.3%	40.3%
Profit sharing	7.2%	7.6%
Paid time off	72.4%	64.5%
Average CA	\$28,158	\$24,166
Average LMT	\$32,300	\$26,578
Average DC	\$114,689	\$81,069
Average total DC comp.	\$137,891	\$99,925

Integrated healthcare clinics earn more

Practices with a chiropractor and a medical doctor (MD) and/or a physical therapist (PT) are considered integrated healthcare practices or multidisciplinary practices.

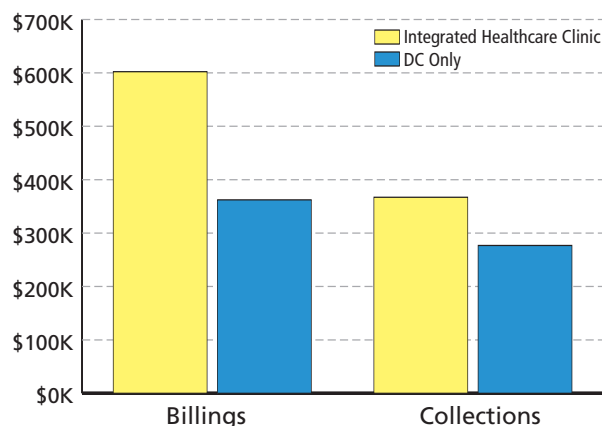
Respondents reported extraordinary billings, collections, and total compensation packages.

• **Billings.** Integrated practices had billings of \$602,260, compared to \$362,236 for solo DCs.

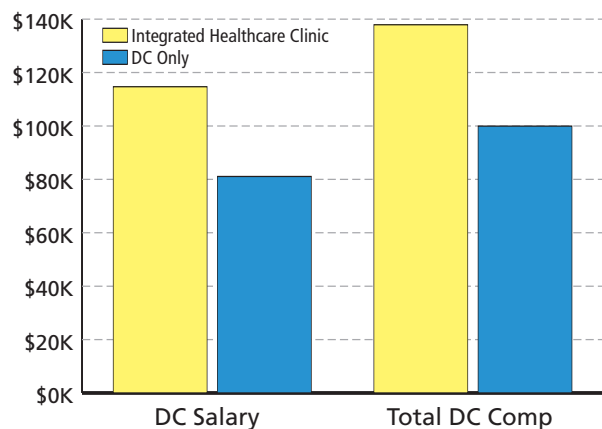
• **Collections.** Practices having an MD or PT on staff had collections of \$367,102, compared to \$276,789 for solo clinics.

• **Salaries and total compensation.** DCs in multidisciplinary (or integrated) practices were paid an average salary of \$114,689, while those in DC-only clinics were paid an average of \$81,069.

DC vs. Integrated Healthcare Clinics: Comparison of Financials



A Look at Average DC Compensation



Salary is not the only measure of compensation.

Total compensation for unincorporated DCs is defined as earnings after tax-deductible expenses but before income taxes.

For DCs in a professional corporation, it is the sum of salary, bonuses, and retirement/profit-sharing contributions made on their behalf.

DCs in integrated healthcare clinics reported average total compensation packages worth \$137,891, while solo DCs had average total compensations of \$99,925.

MORE DATA OF INTEREST

The survey uncovered some other interesting data concerning integrated healthcare practices:

- **Name change.** According to last year's survey, 40.5 percent of integrated healthcare practices labeled themselves as clinics, 18.5 percent were wellness centers, and 37.8 percent were rehab centers.

This year's survey reveals a shift in names.

Of those responding, 64.3 percent call themselves a clinic, 26.3 percent are wellness centers, and only 8.1 percent are calling themselves a rehab center.

- **Better bonuses.** More multidisciplinary practices (56.3 percent) tend to offer incentives or bonuses than DC-only practices (40.3 percent).

Likewise, more (72.4 percent, compared to 64.5 percent) offer paid time off.

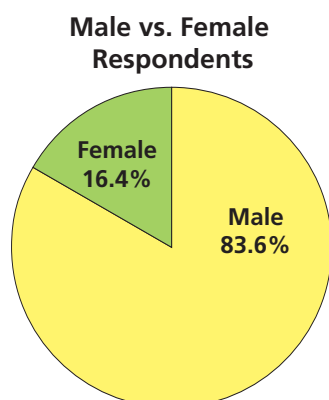
- **Better pay.** Pay and benefits generally go together. Consequently, integrated healthcare practices pay CAs and licensed massage therapists (LMTs) better than DC-only practices.

Battle of the sexes

It is the age-old fight — male versus female. But how do female chiropractors really compare to male chiropractors? This year, 16.4 percent of our survey takers were female, and according to past surveys, that number has remained fairly consistent over the past few years. In 2008, 17.7 percent were female; in 2007, 19.6 percent; and in 2006 and 2005, 15.6 percent.

Women have lower average salaries (\$74,478, compared to \$93,159 for men) and lower average total compensation (\$81,288, compared to \$116,761 for men).

A look at other statistics may indicate why:



• Hours spent with patients.

Female chiropractors spend fewer hours overall in patient care than their male counterparts. Only 48.3 percent of female DCs spend more than 30 hours a week with patients, compared to 53.2 percent of the males; however, more females (37.2 percent) than males (31.1 percent) reported working more than 36 hours per week with patients.

• Patients.

Females have a lower patient-visit average (PVA) than males (24.3 vs. 33.2) and they see fewer patients per week (90.8, compared to 112 for males). They also acquire fewer new patients each week than their male counterparts

(5.32, compared to 5.83).

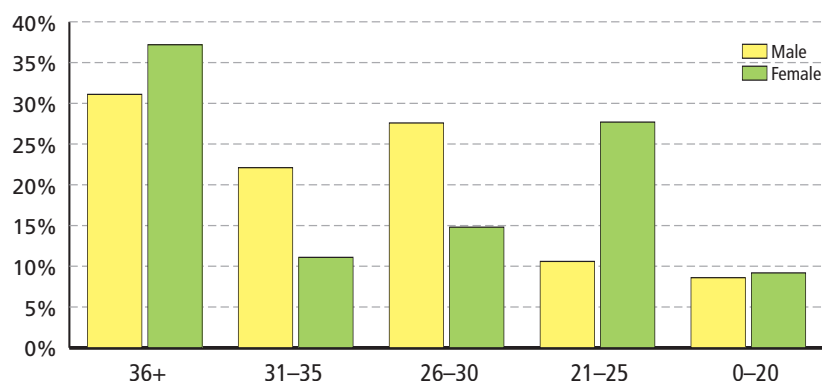
• Groups or partnerships.

Group practices, which tend to be more lucrative than solo practices, also see a smaller percentage of women than men — 17.4 percent,

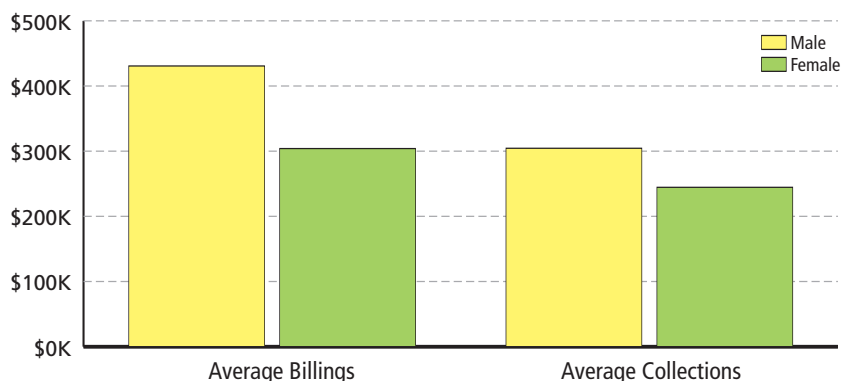
compared to 82.5 percent.

• **Advertising.** Women spend less on advertising than men. According to the survey, the average advertising costs for female DCs were \$9,092. Male DCs spent on average \$10,279.

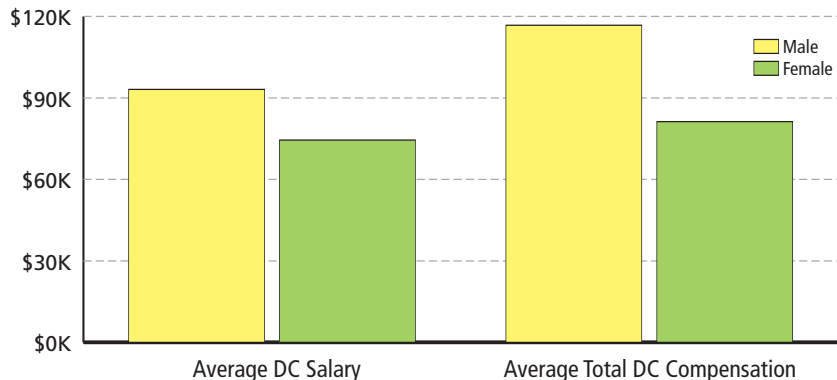
Gender Differences: Hours Spent in Patient Care



Gender Differences: Billings and Collections



Male vs. Female: Average Salary and Total Compensation



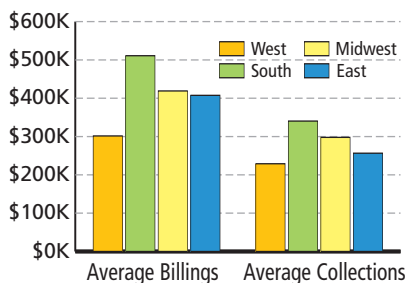
South's at the top — again

For the last few years, the South has boasted the best earnings — and this year is no exception. Respondents in southern states had an average of \$510,902 in billings, an average of \$340,399 in collections, and an average total compensation of \$139,236.

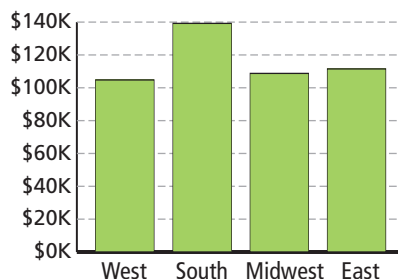
Respondents in the Midwest came in second when it came to average billings (\$419,028) and average collections (\$297,886); however, came in third in average total compensation (\$108,771).

DCs in the West had the lowest average billings (\$301,493) as well as the lowest collections (\$228,947), but the highest average salary paid to the chiropractor (\$91,540) and the chiropractic assistant (\$25,981). The average total compensation for DCs in the West, however, was the lowest at \$104,776.

Regional Comparisons of Average Billings and Collections



How Average Total DC Compensation Compares Among the Regions



Comparing the Regions

PERSONAL

CHARACTERISTICS

	WEST	SOUTH	MIDWEST	EAST
Average age	45.8	44.5	42.8	45.1
Male	83.9%	89.2%	81.4%	85.1%
Female	16.1%	10.8%	18.6%	14.9%
Solo	65.9%	67.6%	72.6%	74.7%
Group/partnership	30.8%	28.5%	19.4%	20.9%
Associate	2.2%	2.9%	6.2%	2.9%
Franchisee	1.1%	1.0%	1.8%	1.5%
Years in practice	16.7	15.6	15.2	16.0
Licenses	1.3	1.5	1.3	1.5
Clinics owned	1.0	1.0	1.1	1.1

LOCATION

Urban	43.6%	25.4%	23.1%	20.8%
Suburban	43.6%	61.8%	62.8%	68.7%
Rural	12.7%	12.8%	14.1%	10.5%

CLINIC STATISTICS

No. of employees	3.2	3.7	3.2	2.9
No. of FT employees	2.0	2.7	2.3	1.6
PVA	37.7	34.8	37.7	36.9
Patients per week	93.4	107.2	113.4	126.5
New patients/week	5.2	6.5	4.9	4.0
Cash only	35.4%	21.4%	15.2%	19.3%
Average billings	\$301,493	\$510,902	\$419,028	\$407,539
Average collections	\$228,947	\$340,399	\$297,886	\$256,545

EXPENSES

Advertising	\$10,111	\$12,426	\$9,790	\$10,014
Malpractice insurance	\$2,084	\$2,673	\$2,221	\$2,611
Office lease/mortgage (yr)	\$25,166	\$26,611	\$22,196	\$20,393

SALARIES

Average associate	\$61,000	\$64,600	\$58,818	\$62,625
Average CA	\$25,981	\$25,502	\$25,818	\$25,470
Average LMT	\$28,333	\$28,833	\$26,142	\$26,000
Average DC	\$91,540	\$89,346	\$87,345	\$90,611
Average total DC comp.	\$104,776	\$139,236	\$108,771	\$111,492

Suburbia is where it's at

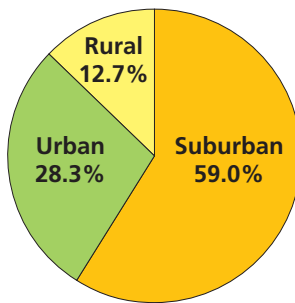
Are you a city mouse, suburbanite, or country mouse? Which type of location has the most payoff — an urban, suburban, or rural setting?

This year's survey revealed that the suburbs are where 59.0 percent of respondents prefer to practice, followed by the city (28.3 percent) and 12.7 percent responded that a country locale appeals to them.

Suburban doctors have higher average collections (\$321,610) than those in the city (\$285,005) or the country (\$222,270), and they also take home a higher average salary — \$102,424 — compared to \$89,744 earned by urban DCs and \$85,913 earned by rural DCs.

According to our survey, suburban DCs also come out ahead with an average total compensation of \$118,629. Rural DCs enjoy an average total compensation of \$104,025, while urban practitioners reported a slightly higher average total compensation of \$104,173.

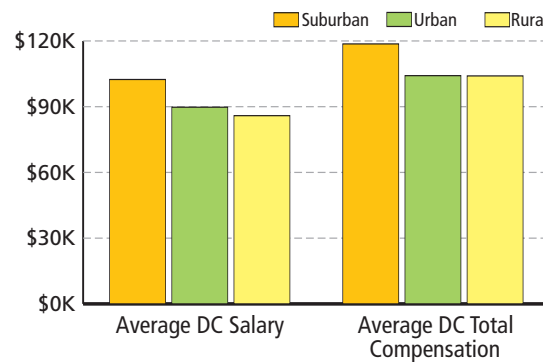
Location Preferences



Suburban, City, and Rural Comparisons



Average DC Compensation by Locality



Young ones are go-getters

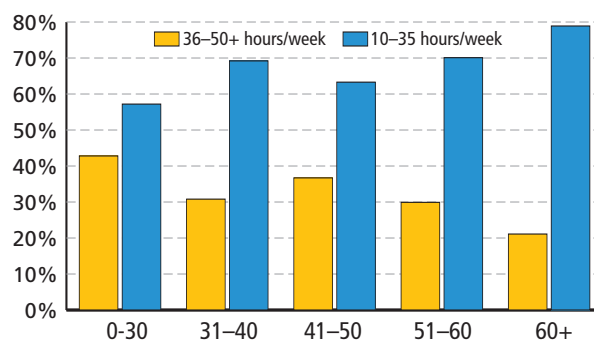
Wonder if you are working more than your fellow DCs? The answer may be listed here. We asked respondents, who ranged in age from 25 years old to 72 years old, to indicate how much time they spent in patient care each week.

The “under 30” respondents are the go-getters of all the age groups — with 42.8 percent reporting they spend 36 or more hours per week with patients. Although, the 41 to 50 year old age group was not too far behind with 36.7 percent of them saying they worked 36 or more hours per week with patients.

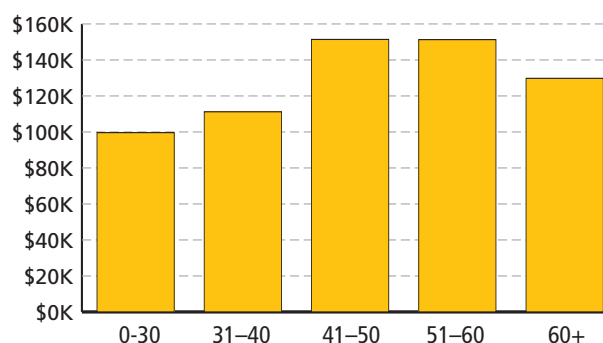
The group that spent the least amount of time with patients was the “over 60” age group, with only 21.1 percent disclosing that they spend 36 or more hours with patients.

Age and compensation seemed to be correlated, with older, more experienced DCs having higher average total compensations. The 41 to 50 year old age group and the 51 to 60 year old age group were about even in average total compensations — \$151,425 and \$151,290, respectfully. The “over 60” group, however, saw the third largest average compensation at \$129,800.

Hours Worked by Age Group



Income by Age Group (Total DC Compensation)



Comparing salaries and benefits

Do you offer your employees retirement? How about healthcare benefits? Perhaps you prefer to offer bonuses or paid time off? Compensation and benefits are important to employees. Some practices face staff turnover regularly because they don't pay fairly or competitively, and don't offer any benefits to compensate.

On the past two years' surveys, we asked for salary information on full-time employees only — not part time — to try and get a better understanding of salaries. We defined "full time" as employees who work 30 hours or more a week.

We found that practices employ, on average, 3.1

employees, but only 2.1 are full time under our definition.

The average salary paid to those full-time employees was:

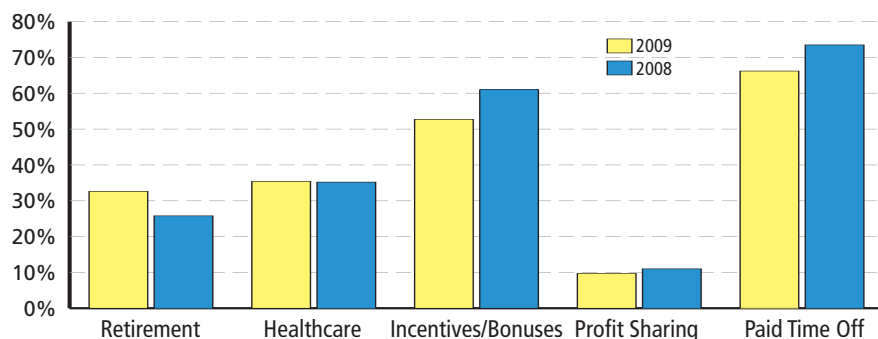
- CA — \$24,430;
- Licensed massage therapist (LMT) — \$22,044;
- Physical therapist (PT) — \$55,000;
- Associate — \$61,719; and
- DCs paid themselves \$94,454.

Benefits are also important for good employee relations and are important for retention. This year's survey saw an increase in retirement programs (32.6 percent, compared to 25.8 percent in 2008) and slightly more offered some

type of healthcare plan (35.4 percent, compared to 35.2 percent in 2008).

Other benefits, however, saw a decline. Paid time off — a combination of vacation and/or sick days — dropped to 66.2 percent this year (compared to 73.5 percent in 2008 and 67.5 percent in 2007), and incentives and bonuses fell to 52.7 percent, compared to 61.0 percent the year before.

2-year Comparison of Employee Benefits



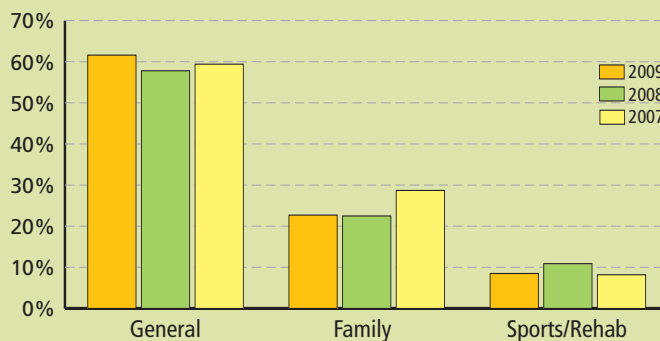
What's in a name?

Whether you specialize for a certain patient base or consider yourself a general practice, what you call your clinic can be a crucial part to your success.

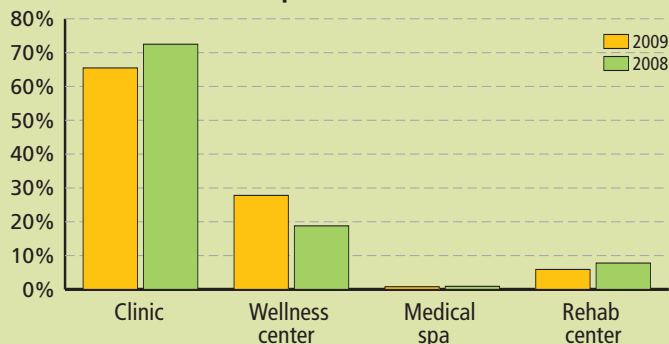
Generalists accounted for 61.6 percent of the respondents this year — which is an increase compared to the last two years, but closer to how it was in 2006. In 2006, 62.8 percent of respondents said they were generalists, compared to 59.4 percent in 2007 and 57.8 percent in 2008.

Clinics, however, continue to be a popular label, with 65.5 percent of respondents saying "clinic" most closely matches the name of their practice. Wellness center came in second at 27.8 percent — a nice increase from the less than 20 percent (18.8 percent) in 2008. Rehab center takes third place with 5.9 percent of the respondents, down from 7.8 percent a year ago.

Chiropractic Specialties



2-Year Comparison of Practice Labels



Money, money, money

While there are many sources of revenue for your practice, we only asked about insurance reimbursement, cash payments for treatments, auto insurance, Medicare, workers' compensation reimbursements, retail, diagnostics, Medicaid, and consulting.

The amount of revenues generated from the various sources remained approximately the same as the previous year, with insurance accounting for 42.1 percent of all revenues.

The revenue source with the largest increase in this year's survey was cash, with a 2.3 percent increase (34.3 percent in 2009, compared to 32.0 percent in 2008).

Sources of Income

	2009	2008
Insurance	42.1%	42.5%
Cash	34.3%	32.0%
Auto Insurance	11.8%	12.8%
Medicare	11.5%	11.0%
Workers' comp	4.4%	4.4%
Retail	4.1%	3.9%
Diagnostics	2.8%	1.6%
Medicaid	2.6%	1.6%
Consulting	0.7%	0.8%

Steady growth for products

One of the popular revenue sources for chiropractors is products. In fact, the number of respondents offering products increased this year to 96.2 percent. In 2008, 91.8 percent reported product offerings; in 2007, it was only 87.9 percent.

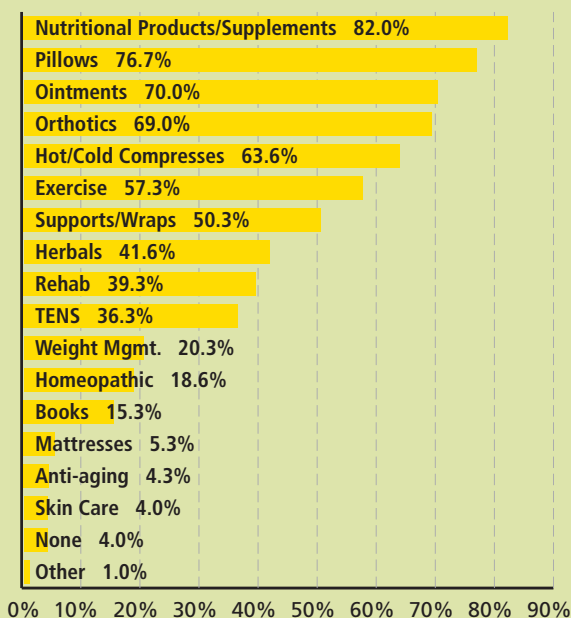
Respondents also said retail sales accounted for 4.07 percent of total practice revenues, basically holding steady from a year ago (3.9 percent).

Which products do respondents offer? The top five include:

- **Nutritional products/supplements.** 82.0 percent, up 11.0 percent from last year;
- **Pillows.** 76.7 percent, compared to 73.6 percent last year;
- **Ointments.** 70.0 percent, up almost 18 percent from 2008;
- **Orthotics.** 69.0 percent, compared to 59.8 percent from 2008; and
- **Hot/cold compresses.** 63.6 percent, down from 67.2 percent the previous year.

Noteworthy: The percent of chiropractors offering supports and wraps products increased to 50.3 percent, up from 37.2 percent from the previous year — a 35.2 percent increase.

Which Products Are Offered to Patients?



Keeping overhead low

Low overhead costs and good revenues are two components to a profitable business. Our survey asked respondents to identify their expenses in three key areas — advertising, malpractice insurance, and office lease or mortgage.

- **Advertising.** Average costs in this year's survey were \$12,605, representing a decrease from last year's costs of \$13,517.
- **Malpractice insurance.** Respondents reported an average expense of \$2,335, a decrease from \$2,677 in 2008.
- **Office lease or mortgage.** Average costs were \$23,692, pretty comparable to last year's costs of \$23,259.

Major Practice Expenses

	2009	2008
Advertising	\$12,605	\$13,517
Malpractice insurance	\$2,335	\$2,677
Office lease or mortgage (yr)	\$23,692	\$23,259

Specialists help increase income

Hiring specialists to work in your clinic is one way to make more money — at least a licensed massage therapist (LMT).

That is one conclusion from the survey results from the past two years.

Survey respondents stated they employ some type of specialist — whether it is a licensed massage therapist (LMT), physical therapist

MODALITIES OFFERED

Respondents have at least one specialist on staff. If you were to employ only one specialist in your clinic, a good choice would be an LMT. Our survey showed that 81.3 percent of *all* respondents have at least one LMT.

Other popular specialists include:

- Acupuncturist, 24.5 percent;
- Nutritionist, 7.7 percent;

How Specialists Boost Your Income

	SPECIALISTS	NO SPECIALISTS
Average Total Comp.	\$140,575	\$96,976
EXPENSES		
Advertising	\$17,544	\$8,657
Malpractice insurance	\$3,120	\$2,291
Office lease/mortgage (yr)	\$27,400	\$22,048
SALARY		
Associate	\$62,666	\$54,520
CA	\$27,200	\$26,918
LMT	\$28,000	\$26,571
PT	\$77,500	N/A
DC	\$128,550	\$98,865

(PT), acupuncturist, medical doctor (MD or DO), nutritionist, or trainer — to work in their practices, either as an employee or as a contractor.

Clinics employing specialists see more patients per week (124.9, compared to 105.3 patients per week in nonspecialist clinics); get more new patients per week (5.8 vs. 4.7); bill more (average of \$439,113 versus \$354,461); and collect more (average of \$296,722 versus \$238,882).

The result of this improved performance is a higher average total compensation for the DC (\$140,575 versus \$96,976).

- MD/DO, 7.1 percent;
- PT, 5.8 percent;
- Trainer, 3.2 percent and
- Other, to include naturopathic doctor, 9.7 percent.

Respondents indicated they offer many modalities, even if they do not have specialists who provide them. These modalities include:

- Physical therapy, 61.4 percent;
- Exercise, 61.4 percent;
- Nutrition, 59.4 percent;
- Massage, 53.8 percent;
- Weight loss, 21.8 percent;
- Acupuncture, 21.8 percent; and
- Homeopathy, 7.9 percent. 