

18TH ANNUAL SALARY
& EXPENSE SURVEY

Revival of the fittest

The chiropractic industry has a seat at the table for you. But as everyone contends with the complex financial burdens of a new healthcare era, be prepared to fight for your future.

BY CAROLINE FEENEY



WILDPixel/THINKSTOCK

The course you've traversed to find your place in the chiropractic profession has been strewn with obstacles from the beginning.

You have a permanent bruise from that post-graduation moment when you felt the crushing stress of debt, then set out to start your own business. If you find yourself midway or late in your career, you might encounter a few scars acquired during that time you transformed binders full of patients' paper charts to superior digital documents.

Add the concerns of lower reimbursement rates, tighter compliance regulations, and the need for sophisticated technology to accomplish the daily functions of your practice, and you might feel like you're on the ropes. But despite your bumps and bandages, you're still here. You care about your patients and love what you do.

Over the past year we've discussed an altered financial landscape due to the growing costs of managing a practice, legislative requirements, and new administrative challenges. In our 18th Annual Salary and Expense Survey, which included more than 700 responses across all but two states, we saw reimbursement rates decline by 2 percentage points overall, and a 10-percent decrease in salaries on average.

What this year's survey shows, however, is that while many chiropractors have indeed survived the widespread changes in the industry—with some facing stagnant or lower profits—others have found innovative ways to boost their income.

Yours for the taking

As recently as March 2015, MarketWatch published a digital slideshow naming the top 10

professions with the best job security. Chiropractors made the list—in fact, they took the No. 1 spot. The article reported that chiropractic employment is expected to grow nearly 15 percent in the next seven years and discussed how DCs are moving toward “specialization and advanced training in the field.”¹

The results of our survey indicate that those opting for specialization by teaming with other healthcare professionals set themselves up for higher earning potential. We observed an increase in those practices identifying as “wellness centers,” perhaps indicating a new focus on fitness and nutrition.

Integrated practices (those with an MD and DC on staff) and multidisciplinary clinics reported higher average salaries among chiropractors than DC-only practices. Group operations reported an average salary of \$40,000 more than solo practices, which still

make up nearly two thirds of the total.

Those DCs with other specialists on staff consistently reported higher salaries as well. With deeper pockets, chiropractors are more likely to offer their staff benefits including healthcare and retirement packages—a recipe for employee loyalty and vitality.

Meanwhile, the survey illustrated that DCs willing to put hard work into their early careers also stand to reap the benefits later: The numbers show improved income as you gain more experience in the field. Our young docs reported working longer hours for less pay, but if they follow in the footsteps of their chiropractic forefathers, they'll acquire more while working less in their 30s and 40s.

Beyond survival

You may be perfectly content operating a smaller practice as a solo DC, and, as MarketWatch notes, your job isn't going anywhere. Each path within the industry presents unique advantages and challenges, and what's best for you won't always align with current trends.

But you know whether you've reached your personal career goals—and you can either strive to advance through improved documentation, up-to-date technology, and the most modern research, or maintain the status quo. No doubt your direct

3-Year Comparison of Respondent Information

Personal Characteristics	2015	2014	2013
Average age	47.0	46.3	45.5
Male	78.2%	79.3%	79.6%
Female	21.8%	20.7%	20.4%
Years in practice	18.9	17.5	16.8
Solo practitioner	62.8%	64.4%	57.2%
Group practitioner/partner	27.1%	25.1%	28.8%
Associate	9.6%	8.7%	13.3%
Franchise owner	0.5%	1.8%	0.7%
Practice Characteristics			
Suburban	49.8%	48.2%	53.6%
Urban	29.3%	30.2%	27.3%
Rural	20.9%	21.6%	19.1%
No. of employees	3.5	4.0	4.3
Hours/week in patient care	33.0	32.6	32.0
Average PVA	26.0	23.3	24.3
Average patient visits/week	113.4	130.6	128.0
Average new patients/week	7.0	6.5	7.4
Income Comparisons			
Average gross billings	\$539,046	\$588,484	\$547,597
Average gross collections	\$348,773	\$391,190	\$393,354
Average DC salary	\$89,219	\$99,555	\$100,100
Average DC total comp.	\$122,243	\$127,397	\$136,601
Expenses			
Advertising	\$8,169	\$9,944	\$12,121
Malpractice insurance	\$2,861	\$2,631	\$2,260
Office lease or mortgage (yr)	\$22,616	\$26,099	\$29,159

competitors are aiming to help more people and consequently build their practices every day. Among them, it may as well be a jump ball. Will you be the one to reach it? ■

Reference

¹ MarketWatch. "10 professions with the best job security." <http://www.marketwatch.com/story/10-professions-with-the-best-job-security-2015-03-20>. Published March 20, 2015. Accessed April 2015.

About this survey

Our 18th Annual Salary & Expense Survey had a record number of participants, with 719 doctors of chiropractic responding to the confidential, Web-based questionnaire. Throughout March 2015, *Chiropractic Economics* magazine invited practicing chiropractors (and CAs on their behalf) to complete the yearly survey.

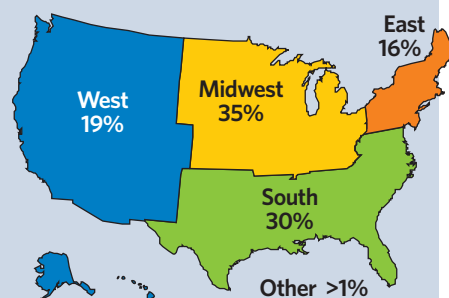
We extended the invitation by email as well as through announcements in our e-newsletters and social networking sites. Additionally, we encouraged a

number of state, national, and alumni associations to distribute the survey to their members.

Regional representation. Our response to this year's survey was wide-ranging, and we received at least one response from every state except Nevada and West Virginia. The regional breakdown is as follows: Midwest, 35 percent; South, 30 percent; West, 19 percent; and East, 16 percent. Less than 1 percent came from outside the U.S.

Statistics. You will find references to averages (or means) in this year's

survey. Reader feedback has indicated that the survey is better understood by only stating averages—calculated by dividing the total by the number in the set.



On a personal level

Our Salary and Expense survey attracted a wide range of doctors across the nation. We heard from DCs between the ages of 24 and 90, and whose years in practice range from less than one to 65. By averaging the responses to many of this year's questions, we can see what our typical respondent might look like:

- ▶ Male (Only 22 percent of respondents were female);
- ▶ 47 years old;
- ▶ A solo practitioner (63 percent); and
- ▶ Licensed in one state;

Our average respondent:

- ▶ Owns one clinic;
- ▶ Prefers to practice in the suburbs (50 percent);
- ▶ Employs four individuals in the clinic (two of whom work full time);
- ▶ Sees 113 patients each week;
- ▶ Has a patient-visit average (PVA) of 26;
- ▶ Attracts seven new patients each week; and
- ▶ Sees patients 33 hours a week.

This respondent:

- ▶ Has average billings of \$539,000 and collections of \$348,800 for a reimbursement rate of 65 percent;
- ▶ Sells products to patients for 7 percent of gross revenues;
- ▶ Pays his CAs \$30,000 and himself \$89,200; and
- ▶ Enjoys average total compensation of \$122,200.

Finally, this typical respondent spends roughly \$22,600 on office leases or mortgages, \$8,000 on advertising, and \$2,800 on malpractice insurance. ■

Overview of 2015 Respondents

Personal Characteristics

Average age	47.0
Male	78.2%
Female	21.8%
Years in practice	18.9
Solo DC	62.8%
In a group or partnership	27.1%
Associate	9.6%
Franchise owner	0.5%
No. of state licenses	1.3

Clinic Characteristics

Clinics	1.0
Urban	29.3%
Suburban	49.8%
Rural	20.9%
Employees	3.5
Average PVA	26.0
Average patients/week	113.4
Average new patients/week	7.0
Cash only	12.3%

Specialty

General	64.4%
Family	16.7%
Sports/rehab	10.7%
Nutrition	1.8%
Pediatrics	0.6%
Other	5.8%

Specialists In Clinic

LMT	42.0%
Acupuncturist	13.5%
Nutritionist	7.8%
MD/DO	6.9%
PT	6.7%
Fitness trainer	6.1%
Other	6.3%
None	45.0%

Income

Average billings	\$539,046
Range	\$10K-\$10M

Average collections	\$348,773
Range	\$5.5K-\$3.6M
% income from retail	7.0%

Average salaries

Average MD/DO	\$98,318
Total DC comp.	\$122,243
Average DC	\$89,219
Average associate	\$63,622
Average PT	\$61,273
Average LDN	\$27,850
Average FT	\$25,942
Average CA	\$29,901
Average LMT	\$23,608

Average Expenses

Advertising	\$8,169
Malpractice insurance	\$2,861
Office lease/mortgage (yr)	\$22,616

Modalities Provided

Chiropractic	98.0%
Instrument adjusting	61.2%
Nutrition	59.8%
Electrotherapy	58.8%
Exercise programs	56.0%
PT/rehab	56.0%
Massage	50.4%
Kinesiology tape	42.2%
Laser therapy	31.0%
Decompression	25.6%
Weight-loss programs	25.0%
Acupuncture	23.8%
Fitness devices	16.6%
Homeopathy	13.0%
Medical services	6.6%
Other	5.4%
None	0.8%

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

Pay it backward

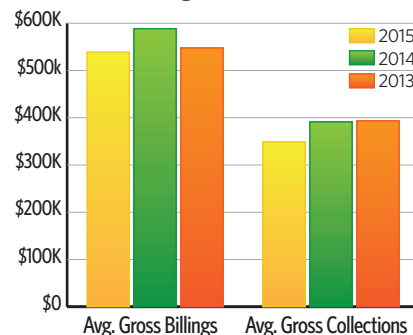
Average billings and collections declined a bit over last year's numbers, though there was no significant fall in this year's overall reimbursement rate.

According to our Salary and Expense survey, average gross billings were reported at \$539,000, down from \$588,500 last year, while collections were reported at \$348,800, down from

\$391,200 last year. In our 2013 survey, respondents reported average gross billings of \$547,600 and collections of \$393,400.

This year's billings and collections equate to an average reimbursement rate of 65 percent—a 3-percent decrease from 2014 and a 10-percent decrease from 2013. ■

3-Year Comparison of Average Gross Billings and Collections



What's up, docs?

As chiropractors assess their own earnings and expenses, familiarity with their financial surroundings in the healthcare industry can provide valuable context to their findings.

Some DCs team up with MDs to create a more comprehensive practice and others consult regularly with general practitioners in their community. As such, each year we compare our salary survey to the data collected by *Medical Economics*.

In *Medical Economics*' 86th annual Exclusive Physician Earnings Survey (featured in its Nov. 6, 2014, issue) respondents indicated that the average salary for general physicians was \$195,000. While this is same number as reported in the previous year, it remains a sharp decline from 2012's reported average salary of \$235,000.

This pattern of falling numbers, followed by consistency between years, suggests that the new reality of an altered healthcare landscape explored in *Chiropractic Economics*' previous survey analyses may apply to other healthcare professionals.

Comparatively, the average total compensation reported for DCs in this year's survey was \$122,000. This is down slightly from 2013 and 2014's results (\$127,000 and \$128,000, respectively) and up from 2012's survey (\$107,000). ■

Industry groupies

Our 2015 survey showed a slight increase in the number of DCs practicing in groups or partnerships (27 percent over 25 percent last year). Since 2013, that number has stayed between 25 and 30 percent, illustrating “power in numbers” as a more popular choice than in years past.

The 63 percent of doctors reporting as solo practitioners remained in line with last year’s 64 percent.

Those indicating they were working as an associate increased slightly. And despite the increase in franchises last year, this year that number dropped to 0.5 percent.

When it comes to billings and collections, solo practices saw a significant decrease in both. Solo DCs reported average billings of \$404,700 and collections of \$243,600 compared to \$568,000 and \$420,500 last year. The reimbursement rate declined as well (60 percent compared to 71 percent). We surmise the broad shifts in these figures reflect the large dataset obtained this year.

Group practice billings, collections, and reimbursement rates fared better over solo DCs across the board. This year’s group billings were \$821,800 (compared to \$780,000 last year) and collections came in at \$553,500. The group practice reimbursement rate declined from last year (67 percent compared to 73 percent in 2014).

The average total compensation for solo DCs this year was \$107,600 compared to \$131,000 last year. The average total compensation for a DC practicing in a group setting increased from \$145,000 last year to \$167,200 this year.

(Note: Total compensation for unincorporated DCs is defined as earnings after tax-deductible expenses, but before income tax. For DCs in a professional corporation, it is the sum of salary, bonuses, and retirement/profit-sharing contributions made on their behalf.)

Solo practices spent \$2,300 on malpractice insurance (same as last year), and \$5,100 on advertising compared to \$11,500 in 2014. Group practices spent more on insurance than last year (\$3,200 compared to \$2,900 in 2014). They also spent nearly \$14,000 on advertising.

Group practices are spending more on office space (\$34,500 compared to \$27,500 last year), while solo practices are spending less (\$18,400 compared to \$26,500 last year). ■

Comparison of Solo & Group Practices

Clinic Label	Solo	Group
Clinic	75.3%	61.7%
Wellness center	19.8%	29.5%
Medical spa	0.5%	0.0%
Rehab center	4.4%	8.7%
Franchisee	0.0%	0.0%

Clinic Statistics

No. of employees	2.3	5.8
No. of FT employees	1.3	4.0
PVA	25.8	27.4
No. of patients/week	90.6	156.4
New patients/week	5.8	9.3
Cash only	14.1%	9.5%
Average billings	\$404,701	\$821,763
Average collections	\$243,645	\$553,520

Compensation and Benefits

Retirement	23.7%	39.2%
Healthcare benefits	21.7%	55.0%
Incentives or bonuses	43.1%	66.4%
Profit sharing	4.1%	11.5%
Paid time off	56.3%	77.1%
Average CA	\$27,740	\$36,485
Average LMT	\$21,865	\$27,000
Average DC	\$77,513	\$118,158
Average total DC comp.	\$107,630	\$167,227

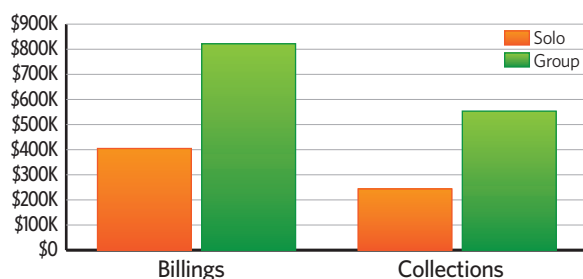
Specialists Provided

LMT	37.0%	51.6%
Acupuncturist	9.5%	23.4%
Nutritionist	4.8%	16.1%
PT	3.2%	12.9%
Fitness trainer	3.2%	14.5%
MD/DO	2.2%	13.7%
Other	4.8%	12.9%
None	53.8%	28.2%

Expenses

Office lease or mortgage (yr)	\$18,399	\$34,470
Advertising	\$5,095	\$13,952
Malpractice insurance	\$2,290	\$3,200

Solo vs. Group: Average Billings and Collections



Solo vs. Group: Average DC Compensation



Dealer's choice

In response to reader requests years ago, *Chiropractic Economics* expanded its "integrated clinics/DCs only" breakdown to provide a more comprehensive look at the profession.

We continued that trend this year by asking respondents to indicate if they were practicing as: a DC only, in an integrated clinic, or in a multidisciplinary clinic.

An integrated clinic includes those practices with both a DC and a medical doctor on staff. A multidisciplinary clinic is defined as having a practicing DC and any other complementary and alternative medicine practitioner on staff.

This year, 65 percent reported as operating alone, down from 67 percent last year; 29 percent said they operated as a multidisciplinary clinic, up from 26 percent last year; and 6 percent responded as an integrated clinic, the same as the previous year.

Here is further breakdown of the numbers:

Billings. Integrated healthcare practices reported the highest billings (\$753,800), while multidisciplinary practices reported billings of \$532,000, and DC-only practices came in at \$471,000.

Collections. Likewise, integrated practices saw the highest collections (\$641,900) while multidisciplinary clinics reported collections of \$403,400, and DC-only practices had collections of \$281,800.

Salaries and total compensation. Unlike last year, those practicing in a DC-only clinic saw a decrease in both average salary and total compensation, while multidisciplinary and integrated clinics saw a boost in these metrics.

Respondents in DC-only practices saw an average salary of \$77,300 (compared to last year's \$97,500) and

DC vs. Integrated and Multidisciplinary Clinics: Significant Comparisons

Practice Type	Multi	Integrated	DC Only
Solo	49.3%	34.9%	71.1%
Group/partnership	36.7%	41.9%	21.1%
Franchisee	0.5%	2.3%	0.4%
Clinic Label			
Clinic	51.5%	53.7%	78.0%
Wellness center	36.4%	14.6%	18.6%
Medical spa	1.0%	0.0%	0.0%
Rehab center	11.1%	31.7%	3.4%
Location			
Urban	34.3%	33.3%	27.1%
Suburban	50.7%	60.0%	48.6%
Rural	15.0%	6.7%	24.3%
Specialty			
General	48.5%	38.4%	72.8%
Family	20.4%	15.4%	15.5%
Sports/rehab	20.5%	19.2%	6.3%
Nutrition	1.5%	3.9%	1.5%
Pediatrics	0.0%	0.0%	0.9%
Other	9.1%	23.1%	3.0%
Clinic Statistics			
No. of employees	4.3	8.1	2.8
No. of FT employees	2.4	7.2	1.8
PVA	27.9	18.5	25.9
Patients per week	120.2	138.9	108.2
New patients/week	8.2	11.4	6.2
Cash only	15.2%	3.7%	12.0%
Expenses			
Office lease/mortgage (yr)	\$28,078	\$29,845	\$19,914
Advertising	\$6,452	\$10,063	\$6,260
Malpractice insurance	\$2,814	\$5,730	\$2,276
Compensation and Benefits			
Offers retirement plan	34.7%	45.0%	23.5%
Healthcare benefits	37.1%	80.0%	25.7%
Offers incentives or bonuses	56.1%	66.7%	47.4%
Profit sharing	9.7%	27.8%	3.7%
Paid time off	61.2%	75.0%	61.7%
Average CA	\$32,797	\$27,938	\$28,174
Average LMT	\$24,905	\$32,500	\$21,482
Average DC	\$99,391	\$151,056	\$77,323
Average total DC comp.	\$126,171	\$191,269	\$112,641

multidisciplinary and integrated clinics fared better with average salaries of \$99,400 and \$151,000, respectively.

(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.)

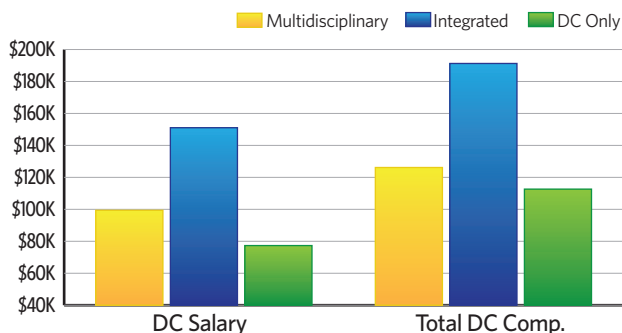
With regard to total compensation, solo DCs averaged \$112,600, while multidisciplinary clinics came in at \$126,200. Integrated practices took a large lead with an average total compensation of \$191,300.

More to the story

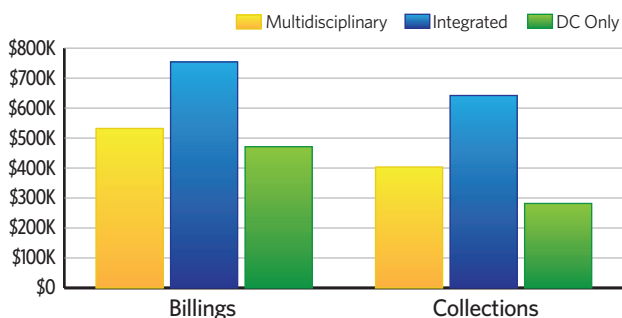
Practice label. Fewer integrated practices identified as rehab centers this year (32 percent) than last year (43 percent). However, those clinics labeled as “wellness centers” rose among all three types of clinics. For integrated practices, this number jumped from 0 percent to 15 percent, and 36 percent of multidisciplinary clinics identified as such, compared to 25 percent in 2014.

Specialties. All three types of clinics reported “general” as their main specialty. Sports/rehab was the second most popular emphasis for multidisciplinary and integrated clinics, and “family” for DC-only practices. ■

A Look at Average DC Compensation



DC vs. Integrated Healthcare vs. Multidisciplinary Clinics: Comparison of Financials



Gender studies

Our annual survey consistently illustrates an 80/20, male-to-female split making up the chiropractic industry. As expected, this year did not indicate any drastic changes in gender demographics.

Even so, we've seen a slight increase in female respondents over the last four surveys. This year, 21.8 percent of respondents were female as opposed to 18.9 percent in 2012, illustrating a modest but evident 3-percent increase over time.

The growing number of female respondents, however, does not represent improvement in the gender gap with regard to salary. Although salary and total compensation declined across the board, male respondents fared better than their female counterparts.

This year's survey saw a decrease in female respondents' annual salary (\$77,000, down from \$84,000 last year), as well as a marked slump in average total compensation (\$92,000, down from \$112,000 last year).

Male respondents also saw a decline in salary, with respondents reporting an average of \$93,000 (compared to \$106,000 in 2014). But this group only saw a slight decrease in total compensation, averaging about \$128,000 (down from \$130,000).

Other statistics:

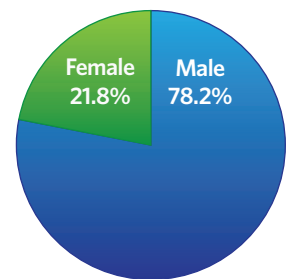
Patient hours. The disparity in the number of hours male and female respondents spend in patient care widened this year. Around 19 percent of female DCs said they spent more than 36 hours in patient care a week (down from 25 percent last year), while 38 percent of male DCs reported the same. A quarter of male respondents said they spend 31 to 35 hours in patient care, compared to 20 percent of women.

Groups or partnerships. The number of women participating in a group setting (24 percent) rose slightly from last year (23 percent), as did the number of

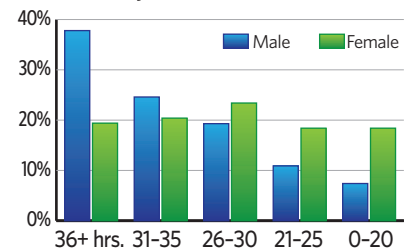
men (28 percent compared to 26 percent last year).

Marketing efforts. Unlike 2014, this year's survey indicated that women spent less money on advertising than men (\$4,441 compared to \$9,062). In addition, women spent less on office leases than men (\$15,543 compared to \$22,206), and on malpractice insurance (\$2,418 compared to \$2,958). ■

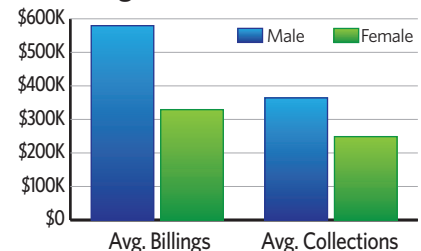
Male vs. Female Respondents



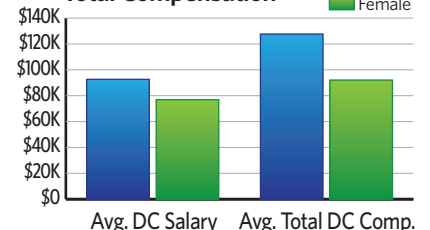
Hours Spent in Patient Care



Billings and Collections



Average Salary and Total Compensation



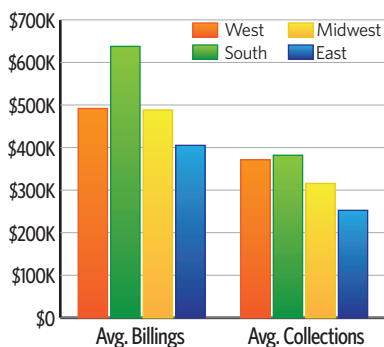
Where do you hail from?

This year's survey illustrated the varied financial landscape for chiropractors across the nation. Regions that reported the highest billings and collections (South and West) also had the highest total compensation, with the Midwest and East reporting consistently lower numbers across the board.

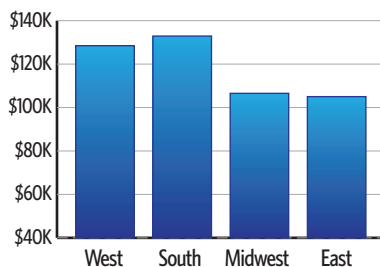
In line with last year's results, the South reported an average total compensation of \$132,900 and the West \$128,500. The remaining regions came in neck and neck with total compensation averaging \$106,500 (Midwest) and \$105,000 (East).

Despite leading in other areas, the South reported the lowest reimbursement rate at 60 percent. The West held the highest reimbursement rate at 75 percent (up from 61 percent last year), followed by the Midwest (65 percent) and East (62 percent). ■

Regional Comparison of Average Billings and Collections



Regional Comparison of Average Total DC Compensation



Comparing the Regions

	West	South	Midwest	East
Personal Characteristics				
Average age	48.5	48.6	44.7	48.0
Male	80.2%	82.4%	76.8%	84.5%
Female	19.8%	17.6%	23.2%	15.5%
Solo	64.2%	69.8%	63.8%	69.1%
Group/partnership	28.4%	22.0%	27.6%	21.4%
Associate	7.4%	7.6%	8.1%	9.5%
Franchisee	0.0%	0.6%	0.5%	0.0%
Years in practice	19.4	20.3	17.2	20.7
Licenses	1.3	1.3	1.3	1.3
Clinics owned	0.9	1.1	1.0	1.1
Location				
Urban	47.9%	31.6%	20.1%	19.5%
Suburban	36.2%	51.9%	49.5%	67.1%
Rural	15.9%	16.5%	30.4%	13.4%
Clinic Statistics				
No. of employees	3.8	3.9	3.1	2.7
No. of FT employees	2.2	3.1	1.8	1.4
PVA	32.0	22.0	27.9	22.5
Patients per week	105.2	122.3	108.3	107.1
New patients/week	6.5	7.4	7.2	5.1
Cash only	12.6%	12.8%	12.4%	7.8%
Average billings	\$491,818	\$637,774	\$488,264	\$405,206
Average collections	\$371,252	\$381,991	\$315,779	\$252,498
Expenses				
Office lease/mortgage (yr)	\$28,693	\$23,619	\$17,798	\$22,942
Advertising	\$9,490	\$9,863	\$8,044	\$4,426
Malpractice insurance	\$4,133	\$2,846	\$2,373	\$2,552
Salaries				
Average associate	\$61,059	\$72,150	\$57,791	\$59,750
Average CA	\$29,210	\$27,577	\$30,201	\$34,231
Average LMT	\$23,189	\$24,200	\$21,079	\$20,875
Average DC	\$92,969	\$89,824	\$83,881	\$89,228
Average total DC comp.	\$128,470	\$132,908	\$106,536	\$105,021

Superb suburbs

An accessible location, variety of patient needs, and the room to expand your practice—all are factors that make the suburbs an attractive place for your office locale.

Year after year, the majority of our respondents pinpoint suburbia as their practice's home base, and the 2015 numbers show once again the financial implications of where you choose to practice.

Although the breakdown between practice locations remained quite similar to last year, we did see a slight increase in suburban chiropractors (50 percent, up from 48 percent in 2014), a minuscule decrease in DCs who reported as urban (29 percent, down from 30 percent last year), and a

decrease in rural practices by less than 1 percentage point.

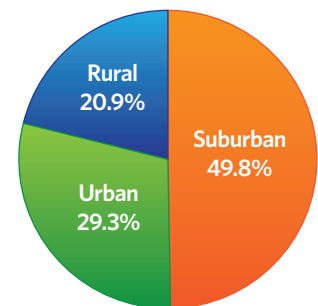
Urban DCs reported the highest average salary (\$97,000), with suburban locations trailing close behind at \$94,000. Suburban chiropractors, however, came in with the highest total compensation at nearly \$132,000 in comparison to the \$120,000 reported by their urban counterparts.

Rural chiropractors indicated a decline in salary (\$69,000, down from \$98,000 last year) as well as a fall in total compensation (\$96,000, compared to \$131,000 in 2014).

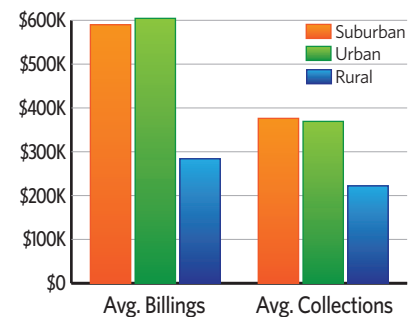
Although rural practices also reported the lowest average in billings (\$284,000) and collections (\$222,000), they also

had the highest reimbursement rate (78 percent). Meanwhile suburban practices maintained billings of \$590,000 and collections of \$376,000—a reimbursement rate of 64 percent. Urban practices reported average billings of \$604,000 and collections of \$369,000—coming in with the lowest reimbursement rate of 61 percent. ■

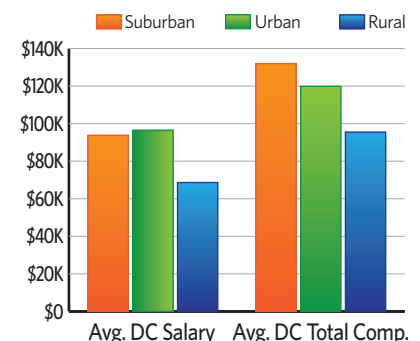
Location Preferences



Suburban, Urban, and Rural Comparisons



Average DC Compensation by Locality



Like a fine wine

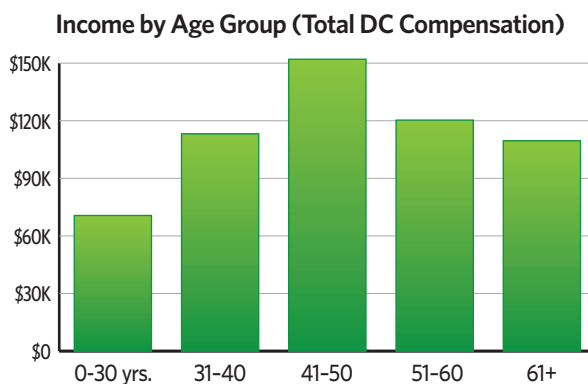
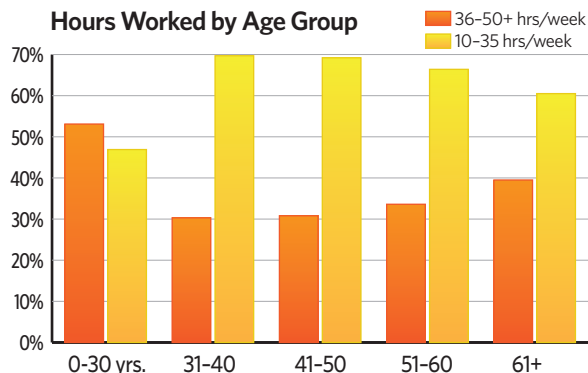
Some things really do get better with age. The results of this year's survey emphasized that, on average, younger DCs have to work longer hours to make less money but, as they get older—and conceivably wiser with experience—their working days get shorter and more lucrative as they reach their mid-30s and 40s.

In line with last year's survey, those starting out in the industry (ages 0 to 30) reported the lowest average total compensation. But the numbers dropped even further this year to \$70,650 compared with \$97,000 for the same age group in 2014.

The financial picture begins to brighten for those DCs ages 31 to 40, who reported an average total compensation of \$113,100. Chiropractors in the 41- to 51-year-old age bracket reported the highest average total compensation (\$152,000).

The 51-to-60 and 60-plus age brackets taper a bit with an average total compensation of \$120,300 and \$109,500, respectively.

Our survey shows that DCs earning the most money spent the least amount of time in patient care per week: Only about 30 percent of doctors between the ages of 31 and 60 reported spending more than 36 hours a week in patient care. In comparison, more than 50 percent of DCs under 30 said they worked between 36 and 50 hours on average. ■

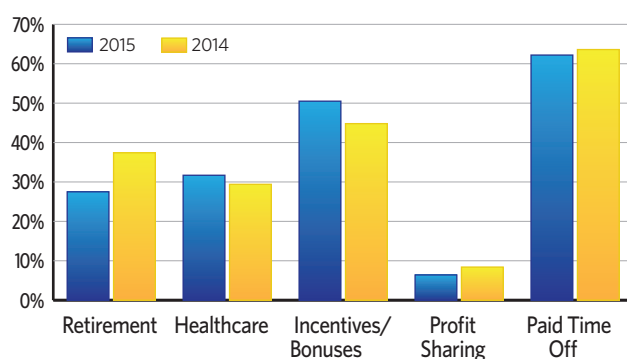


Above and beyond

As the leader of your practice, you are responsible for supporting and communicating not only with patients, but also with the staff members who make your job possible.

Take care of your employees and they will take care of you—by working at their optimal performance level and investing their livelihood into your business. Employee benefits, including healthcare, retirement programs, and PTO are all avenues through which you can show how much you value your team.

2-Year Comparison of Employee Benefits



While the percentage of DCs offering employee benefits decreased in some areas, it increased in others this year.

According to our survey, 28 percent of respondents indicated that they offered some type of retirement plan, compared to 37 percent last year. Those offering a healthcare plan increased from 29 percent last year to 32 percent this year.

Respondents offering paid time off—a combination of vacation and/or sick days—decreased slightly from 64 percent last year to 62 percent in 2015.

Finally, those offering incentives and bonuses and/or profit sharing increased from 53 percent in 2014 to 57 percent this year.

We asked respondents for salary information on full-time employees only—not part-timers. We defined “full time” as employees who work 30 hours or more a week.

Our results indicated that practices employ an average of nearly four employees, with two qualifying as full time.

The average salary paid to those full-time employees was: DC, \$89,000; MD/DO, \$98,000; associate, \$64,000; PT, \$61,000; LDN, \$28,000; FT, \$26,000; CA, \$30,000; and LMT, \$24,000. ■

Break out the label maker

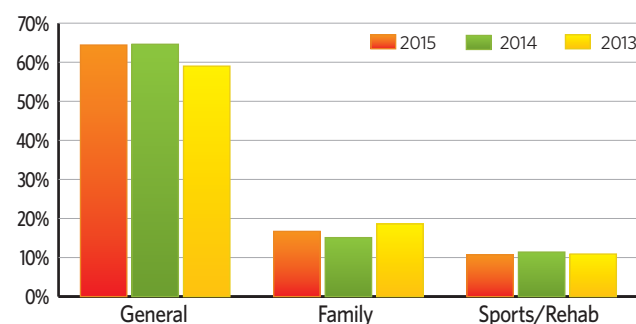
Classifying your practice by the types of services you provide is one way to attract your target patients and set yourself apart. Those who hope to find quality care for their kids might be intrigued by the word “family” in your practice name, and populations without pain who seek a healthier lifestyle are apt to get on board with the idea of a wellness center.

In this year’s survey we once again asked respondents if they considered their practice as being a general, family, or sports/rehab facility. Keeping in line with the previous few years, sports/rehab practices represented between 10 and 11 percent of chiropractors.

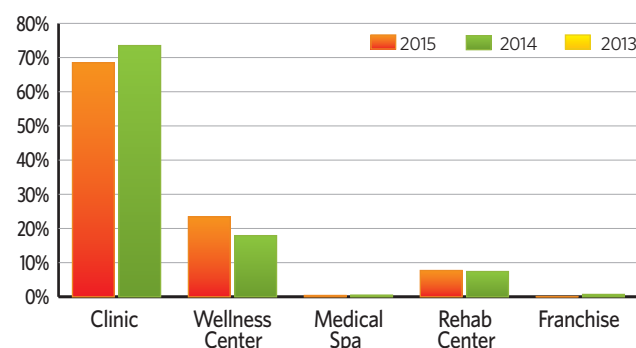
The “general” classification remains the most popular specialty choice at 64 percent, similar to last year’s 65 percent. Family practice came in second (17 percent), up from 15 percent last year.

In addition, “clinic” was still the most popular label among respondents at 69 percent, though it dropped 5 percentage points from last year. As such we saw a jump in those who adopted the wellness center label, which had second-highest number of respondents at 23 percent, up from 18 percent last year. Rehab centers hovered between 7 and 8 percent, with medical spa and franchise rounding out the bottom. ■

Chiropractic Specialties



2-Year Comparison of Practice Labels



Set sale

Our survey shows nearly 96 percent of chiropractors sell at least one product in their practice. As this number has consistently remained high over the years, it's clear that DCs across the board find success through a combination of providing quality care and guiding patients to the best products available.

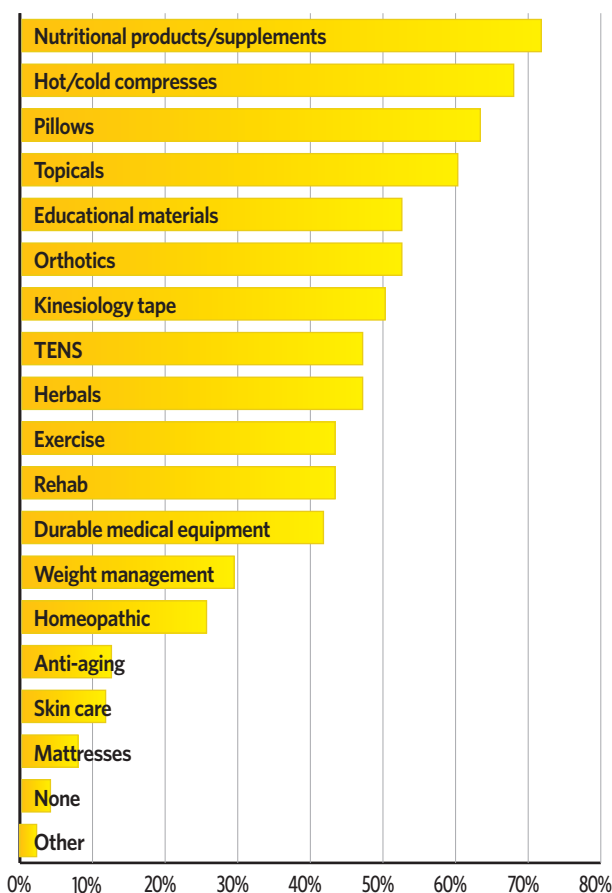
A commitment to retailing top industry products benefits the DC financially and also creates an important liaison between patients and the tools they need to achieve wellness.

So which products do respondents offer? Are you selling the same products as your colleagues? The top five include:

- ▶ **Nutritional products/supplements:** 72 percent, up from 65 percent last year.
- ▶ **Hot/cold compresses:** 68 percent, up from 60 percent the previous year;
- ▶ **Pillows:** 63 percent, down from 65 percent last year;
- ▶ **Topicals:** 60 percent, up from 53 percent in 2014; and
- ▶ **Education materials:** 52 percent, down from 66 percent last year.

Noteworthy: Kinesiology tape, a new addition to this year's survey, proved to be a popular retail item with 50 percent of respondents offering it in their practice. ■

Which Products Are Offered to Patients?



In the black

Chiropractors enter the industry with the intent to care for those who seek their help, and this year's sources-of-income poll once again highlights the average DC's steadfast commitment to patient treatment.

Still, other creative revenue streams can supplement your cash flow as you strive to expand your business. In addition to patient treatment, we asked you to indicate what percentage of your income comes from the following sources: retail, diagnostics, consulting, and other.

This year's survey showed widespread consistency with the numbers recorded in 2014. The biggest change in any category was 0.1 percentage points.

We also asked what percentage of your treatment is paid for by the following: cash from patients, individual or group health insurance, Medicare, auto insurance, Medicaid, workers' compensation, barter or trade, and other. ■

Sources of Income

Patient Treatment	87.4%
Retail	7.2%
Diagnostics	6.5%
Other	3.9%
Consulting	2.0%

Percent from Treatment

Insurance	38.5%
Cash	37.7%
Medicare	12.5%
Auto insurance	12.3%
Workers' comp	4.1%
Medicaid	3.7%
Barter/trade	2.0%
Other	1.7%

Budget busters

Never is the "business side" of your practice so apparent as when you're calculating your expenses. But, as a practice owner and entrepreneur, the money you have coming in must be weighed against the costs required to keep your operations running.

We've highlighted three standard spending areas in the profession—malpractice insurance, advertising, and an office lease or mortgage.

▶ **Office lease or mortgage:** Average costs were \$22,600, a decrease from \$26,100 last year.

▶ **Advertising:** Average costs in this year's survey were \$8,200, representing a decrease from last year's costs of \$9,900.

▶ **Malpractice insurance:** Respondents reported an average expense of \$2,900, up from last year's costs of \$2,600. ■

Major Practice Expenses

	2015	2014
Office lease/mortgage (yr)	\$22,616	\$26,099
Advertising	\$8,169	\$9,944
Malpractice insurance	\$2,861	\$2,631

Jacks of one trade

Standing alone, your expertise in caring for patients through regular adjustments and treating issues related to the musculoskeletal system can undoubtedly set you up for a comfortable career. But if you face stagnation and are looking for paths to revival, year after year our survey demonstrates that joining forces with complementary specialists is a near foolproof way to expand your reach and boost your bottom line.

In 2015 a large percentage of DCs reported having other specialists working or consulting within their practice. Those specialists included LMTs, PTs, and MD/DOs in addition to acupuncturists, fitness trainers, and dietitians.

The specialists who become part of your healthcare team offer a more wide-ranging palette of treatment options and programs. When evaluating how this benefits you, the numbers speak for themselves: Clinics employing specialists see more patients per week (123, compared to 100 patients per week in nonspecialist clinics); bill more (average of \$725,400 versus \$391,900); and collect more (average of \$572,900 versus \$244,300).

As a result, clinics employing specialists averaged a higher total compensation than those practices without specialists (\$133,000 and \$106,200, respectively).

Practices employing specialists also attract a higher number of new patients per week (8) compared to nonspecialist clinics (6).

How Specialists Boost Your Income

	Specialists	No Specialists
Mean Total Comp	\$133,063	\$106,270
Expenses		
Office lease/mortgage (yr)	\$26,270	\$18,062
Advertising	\$11,089	\$4,953
Malpractice insurance	\$3,347	\$2,350
Salary		
DC	\$101,232	\$72,946
Associate	\$66,605	\$55,792
PT	\$66,600	N/A
CA	\$30,824	\$28,661
LMT	\$23,829	\$15,200

Modalities offered

While more than 50 percent of respondents have at least one specialist on staff, the most common specialist was the LMT (42 percent).

Other popular specialists include:

- ▶ Acupuncturist, 13 percent;
- ▶ Nutritionist, 8 percent;
- ▶ MD/DO, 7 percent
- ▶ PT, 7 percent; and
- ▶ Fitness trainer, 6 percent.

And 6 percent of respondents indicated “other” for specialists they have in their clinics.

Respondents (those working in clinics with specialists and those working in clinics without) also reported that they offer a wide range of modalities, even if they do not have specialists who provide them. These modalities include:

- ▶ Chiropractic, 98 percent
- ▶ Instrument adjusting, 61 percent
- ▶ Nutrition, 60 percent
- ▶ Electrotherapy, 59 percent
- ▶ Exercise programs, 56 percent
- ▶ PT/rehab, 56 percent
- ▶ Massage, 50 percent
- ▶ Kinesiology tape, 42 percent
- ▶ Laser therapy, 31 percent
- ▶ Decompression, 26 percent
- ▶ Weight-loss programs, 25 percent
- ▶ Acupuncture, 24 percent
- ▶ Fitness devices, 17 percent
- ▶ Homeopathy, 13 percent
- ▶ Medical services, 7 percent
- ▶ Other, 5 percent
- ▶ None, 1 percent ☺



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