

**DEPARTMENT OF VETERANS AFFAIRS (VA) RESPONSE
TO THE JULY 14, 2004 RECOMMENDATIONS OF THE
CHIROPRACTIC ADVISORY COMMITTEE**

Recommendation 1: Evaluation of the chiropractic care program should encompass the domains of quality of care, access to care, patient functional status, cost/revenue, patient satisfaction, and patient safety.

VA RESPONSE: VA concurs with this recommendation, as it is consistent with VA's ongoing quality and performance program.

Recommendation 2: Whenever possible, mechanisms currently in use by VA should be used to evaluate the chiropractic care program (e.g., patient satisfaction, wait times).

VA RESPONSE: VA concurs with this recommendation, as it is consistent with VA's ongoing quality and performance program.

Recommendation 3: VA should use implementation and evaluation of the chiropractic care program as an opportunity to develop quality assessment tools for the care of veterans with neuromusculoskeletal conditions. Such assessments should include all care disciplines providing care for these conditions.

VA RESPONSE: VA concurs with the intent of this recommendation. VA will review the literature to determine the feasibility of developing quality assessment tools that emphasize patient outcomes for use in evaluating neuromusculoskeletal care within VHA.

Recommendation 4: The Office of Research and Development should develop an appropriate research agenda for chiropractic care.

VA RESPONSE: VA concurs with this recommendation.

Recommendation 5: Each facility should develop a peer review process for chiropractic care that is consistent with the peer review process for other professions.

VA RESPONSE: Peer review is necessary for all VA providers who are credentialed, privileged, or operating within a professional scope of practice. VA

will develop a national or regional peer review process to maximize the potential for objective review.

Recommendation 6: VA should require all authorization denials of outpatient fee basis chiropractic care to be documented, including the reason for denial, and centrally reported for use in program evaluation.

VA RESPONSE: VA concurs with the principle of this recommendation. This data will be part of program evaluation.

Recommendation 7: VA should monitor complaints to the Patient Advocate and use of the clinical appeals process to detect arbitrary denials of referral for chiropractic care.

VA RESPONSE: VA concurs with this recommendation. The Patient Advocate Tracking System will be used to monitor this.

Recommendation 8: Both VA and non-VA doctors of chiropractic (DCs) should be involved in the evaluation and monitoring of the program.

VA RESPONSE: VA concurs with this recommendation and will seek appropriate mechanisms consistent with existing methods of clinical oversight.