

Chiropractic Reps. Meet with Dept. of Veterans' Affairs

DVA TO DECIDE CHIROPRACTIC'S ROLE, BUT SHOWING OF DISUNITY HURTS

Editorial Staff

On November 20, 1999, President Clinton signed the Veterans' Millennium Health Care Act into law. The law, which went into effect Jan. 1, included a provision that required the Department of Veterans Affairs (DVA) to establish a policy for the veterans' health under chapter 17 of title 38, United States Code.¹ The inclusion of the chiropractic provision was the result of lobbying efforts by the American Chiropractic Association (ACA) and the Association of Chiropractic Colleges (ACC).²

Access to veterans opens the door to 3.6 million patients who made an estimated 35.8 million outpatient visits in 1999 alone. The chiropractic provision requires the DVA to submit their policy to Congress "within 120 days after the date of enactment of this Act," making the report due on April 29, 2000.

In accordance with the provision, the DVA held a meeting in Washington, D.C. on February 24. The ACA, ACC, ICA and other chiropractic representatives were invited. DVA officers, lawyers and medical doctors heard five-minute reports from the various groups within the profession.

The ACC and ACA submitted a 54-page joint report: "Integrating Chiropractic Care into the Veterans Health Care System." The report outlined their recommendations to integrate chiropractic care into the VA's health care system:

1. "ensuring access to chiropractic services in the DVA health care system;
2. "scope of practice of doctors of chiropractic within the DVA health care system;
3. "employment status of doctors of chiropractic;
4. "the role of doctors of chiropractic in rural and medically underserved areas;
5. "hospital privileges and credentialing of doctors of chiropractic;
6. "the enhanced role of doctors of chiropractic in the treatment of chronic pain;

7. "developing a chiropractic educational campaign for current and future DVA health care personnel;

8. "establishing a DVA liaison to the chiropractic profession."

The ACC also submitted position statements ("Chiropractic Paradigm"³ and "Chiropractic Scope and Practice"⁴), which were originally published as inserts in the February 24, 1997 issue of *Dynamic Chiropractic*.

The ICA submitted a 39-page report, "Chiropractic in the Veterans Health Care System," which included the ACC's "Chiropractic Paradigm." The ICA report recommended:

- "full-time employment of doctors of chiropractic as professional care givers in department facilities;
- "a basis for out-patient care according to agreed protocols, especially in remote and underserved areas of the nation;
- "direct access;
- "ensure that the present system understands the potential of chiropractic care;
- "the DVA to maintain an open and objective dialogue with chiropractic professional organizations and educational and research institutions."

The other chiropractic organizations in attendance were the Foundation for Chiropractic Education and Research; the Federation of Chiropractic Licensing Boards, and the American Academy of Chiropractic Orthopedics, which all supported the joint ACA/ACC recommendations. The World Chiropractic Alliance was also in attendance and supported the ICA report.

The National Association of Chiropractic Medicine (NACM) was on hand to assert that chiropractic should be limited to "low back only," and then only upon referral from a medical doctor. The NACM voiced their opposition to the DVA contracting doctors of chiropractic in their practices outside the VA hospital setting. The feedback from most observers was that the NACM's position was too far outside of mainstream chiropractic to be considered viable.

That the chiropractic profession was not able to present a single report and solidarity of purpose invoked some interesting comments from those chiropractors in attendance trying to represent the chiropractic profession:

"We are going to continue to press the Veterans' Health Administration to include our recommendations in its chiropractic utilization policy. Unfortunately, our efforts to do this are being harmed by the National Association of Chiropractic Medicine and the World Chiropractic Alliance, who are sending conflicting messages to the VHA about the chiropractic profession." - Gary Cuneo, DC, ACA executive vice president.

"I believe that the chiropractic profession, with the exception of those few fringe detractors in the so-called chiropractic medicine group, are united in their determination to make a meaningful

chiropractic program for veterans happen this year. ICA certainly is, and we stand ready to work with any and all chiropractic organizations to insure that our nation's military veterans receive direct access to quality chiropractic services. They deserve no less." - Dr. Michael McLean, operational chairman, ICA legislative committee.

"We were pleased that the ACC's chiropractic paradigm and scope of practice statements were broadly supported by the groups testifying before the VA." - Dr. George Goodman, ACC immediate past president, and Logan College president.

This meeting, from the perspective of the DVA, would seem to only serve to weaken chiropractic's position in the development of a chiropractic policy for the VA. If the DVA is looking for a way to discount the role of chiropractic in veterans' health care, the conflicting reports certainly provide the necessary fodder. Even if one assumes the best scenario, that the DVA was open to the idea of instituting full chiropractic access, the lack of unity displayed by the representatives of the profession could only erode the DVA's confidence about such an integration.

The DVA is expected to submit their report to Congress at the end of March; only then will the profession know how much work remains to achieve complete access.

References

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