Integrating Novel Non-Pharmacological Services in the Department of Veterans Affairs

*Policy and Practice Examples*

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Disclosure

• Research grant support
  • VA Health Services Research & Development
  • Samueli Institute
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Outline

• VA Policy & Practice Initiatives
• Overview of Services
• Experiences in >14 Years of Chiropractic Program
Timeline

Pub. Law 107-135, Department of Veterans Affairs Health Care Programs Enhancement Act

2001

Chiropractic Care Directive

2004

2006

2008

2010

2012

2014

2016

2017

2018

Pub. Law 114-198, Comprehensive Addiction and Recovery Act (CARA)

Integrative Health Coordinating Center

CIH Directive

HSRD SOTA Conference Results
HSRD SOTA Conference

Non-pharmacological approaches for the management of chronic musculoskeletal pain in VHA

Matthew Bair, MD
Robert Kerns, PhD
Erin Krebs, MD

May 2018
Clinical Policy Recommendation

- Recommend to be implemented across the system early in the course of pain care
  - Cognitive Behavioral Therapy
  - Acceptance and Commitment Therapy
  - Mindfulness Based Stress Reduction
  - Physical Exercise
  - Tai chi
  - Yoga
  - Acupuncture
  - Manipulation
  - Massage

Integration into primary care, pain care, and mental health settings should be a policy priority

Kligler et al, JGIM 2018
• Previously provided by MDs, DOs and DCs
• Recent addition of LAcs
• Battlefield Acupuncture
  • >2,000 VA providers trained (including PAs, NPs, others)
• Acupuncture use increasing

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2018</th>
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<tbody>
<tr>
<td>Uniques</td>
<td>81,715</td>
<td>131,547</td>
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<tr>
<td>Encounters</td>
<td>152,086</td>
<td>181,961</td>
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VA Chiropractic Care

![Bar Chart]

- **2005**: DCs - 20, Facilities - 20
- **2010**: DCs - 40, Facilities - 30
- **2018**: DCs - 160, Facilities - 90

Legend:
- **DCs**: Dark Blue
- **Facilities**: Light Blue
Program Assessment

- Assess the implementation of chiropractic clinics in 7 VA facilities
  - Comparative case study
    - Semi-structured interviews
    - Directed content analysis

Variations in the Implementation and Characteristics of Chiropractic Services in VA

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Background: In 2006, the US Department of Veterans Affairs expanded its delivery of chiropractic care by establishing more chiropractic clinics at select facilities across the country. Systematic information regarding the planning and implementation of these clinics and describing their features and performance is lacking.

Objectives: To document the planning, implementation, key features and performance of VA chiropractic clinics, and to identify variations and their underlying causes and key consequences as well as their implications for policy, practice, and research on the introduction of new clinical services into integrated health care delivery systems.

Research Design, Methods, and Subjects: Compared to case study of 7 clinics involving the web-based and telephone-based interview with 10 key stakeholders, including VA clinicians, clinical leaders and administrative staff, and selected external stakeholders, as well as reviews of key documents and administrative data on clinic performance. Interview data were transcribed, translated, and analyzed using a mixed induction (exploratory) and deductive approach.

Results and Conclusions: Interview data revealed considerable variations in clinic planning and implementation processes and clinic features, as well as perceptions of clinic performance and quality. Administrative data showed high variation in patterns of clinic patient volume over time. A facility’s initial willingness to establish a chiropractic clinic, along with a higher degree of perceived evidence-based and collegial attributes of the facility chiropractor, emerged as key factors associated with higher and more consistent delivery of chiropractic services and higher perceived quality of those services.

Key Words: Department of Veterans Affairs, chiropractic, health services research, rehabilitation services, complementary therapies, program evaluation

(Lisi et al. Medical Care 2014:2: 397–533c)

Chiropractic services are widely used in the United States and are covered by Medicare, public and private health insurance plans, the Department of Defense, and Medicaid programs.1,2 It has been estimated that chiropractors provide up to 40% of the low back pain care in the United States,3 and generally deliver care consistent with current clinical practice guidelines.4,5 Nonetheless, before 1990 it was not common for the Department of Veterans Affairs (VA) to provide chiropractic services to Veterans.6–8 Congressional authorizations in 1999 and 2001 resulted in the addition of chiropractic care to VA’s standard medical benefits, making it available to all eligible Veterans (Pub. L. 106–111; Pub. L. 107–135).9 In 2004, VA established the policy that a minimum of 1 health care facility in each of its 21 geographic service regions would provide chiropractic services; the remaining facilities would provide services only on an as-needed basis.

An inaugural group of 25 VA facilities was selected and by the end of 2005 each had established an onsite chiropractic clinic. The planning of these clinics and development of operational parameters were largely determined by each local
Chiropractic Implementation

**Barriers**
- Individual physician negative perceptions
- Non-funded mandate
- Lack of Central Office guidance (early)

**Facilitators**
- Individual physician positive perceptions
- Funding initiatives
- Central Office leadership (later)
First 11 Years

- Serial cross sectional analysis of VA administrative data
- VA’s Corporate Data Warehouse
- Previously validated informatics methodology
VA Chiropractic Clinics

- Primary Care: 23%
- Pain: 25%
- Other: 3%
- PM&R: 49%
On-station chiro use

Grown on average 18% per year since FY 2005
On-station care characteristics

Conditions/Cases

- Low back (60%)
- Neck (25%)
- Age/disability spectrum
- Younger and female

Services

- Evaluation & management
- Chiropractic manipulative therapy
- Exercise, active care, advice
- Massage, acupuncture, other manual therapies

Lisi & Brandt, JMPT 2016
Opioid use among Veterans of recent wars receiving Veterans Affairs chiropractic care

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14,025 chiropractic users

Opioid timing

Percentage of Veterans receiving opioids was higher in each of the 30-day windows prior to the index chiro visit

Lisi et al, Pain Med 2018