News item

Pew revisited: recommendations for the 21st century

It has been at least 16 years since the Pew Health Professions Commission report, *Reforming Healthcare Workforce Regulation Policy: Considerations for the 21st Century*, was released to the public. The report made 10 relevant and important recommendations for health care reform, which impact the chiropractic profession. Four of these are discussed here:

“Recommendation 1: States should use standardized and understandable language for health professions regulation and its functions to clearly describe them for consumers, provider organizations, businesses, and the professions.

Recommendation 3: States should base practice acts on demonstrated initial and continuing competence. This process must allow and expect different professions to share overlapping scopes of practice. States should explore pathways to allow all professionals to provide services to the full extent of their current knowledge, training, experience, and skills.

Recommendation 4: States should redesign health professional boards and their functions to reflect the interdisciplinary and public accountability demands of the changing health care delivery system.

Recommendation 7: States should require each board to develop, implement and evaluate continuing competency requirements to assure the continuing competence of regulated health care professionals.” (*Reforming Healthcare Workforce Regulation Policy: Considerations for the 21st Century*; <http://www.soundrock.com/sop/downloads.html>).

These recommendations allow and expect different professions to share overlapping scopes of practice. By adopting and implementing these recommendations, it is hoped that the following would occur: increased consumer choice and interprofessional and intraprofessional competition in the health care marketplace,

increased consumer access to a variety of qualified health care providers, and reduced health care costs. States are encouraged to explore pathways to allow all professionals, including primary care-trained chiropractic physicians, to provide services to the full extent of their current knowledge, training, experience, and skill. Primary care-trained chiropractic physicians should be allowed to practice primary care medicine based on their initial and ongoing competencies.

Time for tiering?

In the state of Washington, health plans have tiered networks for primary care physicians. This particular tiering is based on clinical outcomes, most notably clinical efficacy and patient satisfaction. As the health care system emerges and matures, we suspect that all doctors will be profiled and monitored not only for cost but also for clinical outcomes and patient satisfaction. Web sites such as www.healthgrades.com are an example of this trend.

Tiering of the chiropractic profession has been recommended by policy-makers including state and national regulatory bodies, such as Bruce Douglas, JD, former director, Department of Regulatory Agencies—Colorado, and member of the PEW Task Force on Health Care Workforce Regulation. The AMI Blue Cross/Blue Shield Illinois chiropractic primary care model has demonstrated effectively that the primary care-trained chiropractic provides services that decrease prescription drug costs, hospital stays, and outpatient procedures. New Mexico advanced practice chiropractic physicians have demonstrated high consumer satisfaction and improved access to health care for the medically underserved and rural populations.

The American Academy of Chiropractic Physicians endorses increased access to chiropractic primary care services, chiropractic professional tiering, selective medicalization, and the authority to prescribe. The Academy applauds the Council on Chiropractic Education and chiropractic medical schools that are training competent primary care chiropractic physicians.

For more information about the American Academy of Chiropractic Physicians, please visit www.aacp.net.

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