

➡ **CHIROPRACTIC PLAN OF TREATMENT FORMS:**

On the initial visit with a member a Chiropractic Plan of Treatment Form should have the following sections completed:

- Member/chiropractors demographic box
- Date of injury/onset of symptoms
- Date treatment initiated for this episode
- Pain assessment (only 1st visit area)
- Occupation and if the condition was related to work
- New patient to practice
- Has patient received chiropractic care before; if so name of chiropractor and dates
- Problem statement/ADL deficits according to severity
- Internal Classification of Disease 9th edition (ICD-9)
- Subjective history
- Objective findings
- Assessment
- Plan

The Plan of Treatment should then be placed in the member's chart.

If the member requires a sixth visit, on that visit the Chiropractic Plan of Treatment should be updated to include a Pain Assessment at that point and then placed in the member's chart.

If the member is on their twelfth visit and appears will require additional care then the Chiropractic Plan of Treatment form must be updated to include:

- Pain assessment
- Subjective history
- Objective findings
- Assessment
- Plan
- Visits section
- Signature of Chiropractor
- Date

Completed form(s) should be either faxed to (802) 371-3491 or mailed to: BCBSVT/TVHP, P. O. Box 186, Montpelier, VT 05601. For Managed Care members, a copy should be forwarded to the member's Primary Care Physician.

Helpful tips regarding the Chiropractic Plan of Treatment Form:

Investigation into origins of condition, however complex must be thorough;

- Solutions to any aggravating factors and compliance on the part of the patient must be documented
- Results of the coordination of the care with any other provider(s) must be listed
- Examples of complicating factors:
 - General physical condition of the patient (ex. obese/deconditioned)
 - Specific medical conditions (viscerosomatics)
 - Specific musculoskeletal condition (ex: HNP)
 - Emotional status (depression)
 - Lifestyle, social issues (abusive relationship)
 - Digestive/nutritional (in need of detoxification)
- Illegible or incomplete forms will be returned and may cause a delay in the decision process