

106th Congress Ends, Leaving Mixed Record on Chiropractic

The 106th Congress has concluded its deliberations and once again, despite determined and increasingly coordinated lobbying efforts, we in the chiropractic profession are left to ponder how we can more effectively act to translate the vision we have for our profession and the concerns we have for our patients into public policy through the national legislative process. There can be no doubt that the now-ended congressional session was characterized far more by disappointment and potential setbacks than by genuine progress. This is a state of affairs that every leader and every organization in the chiropractic profession must not minimize. It is time to do things differently.

The high point of the Congress was the recent action to make some modest provisions for the ongoing inclusion of chiropractic services in the health programs of the U.S. Armed Forces. In the face of determined opposition from the Department of Defense (DoD), Congress authorized a chiropractic benefit for active duty personnel and forced the DoD to recognize that their position of obstruction and delay on the issue of chiropractic inclusion was unacceptable. The International Chiropractors Association (ICA), the Association of Chiropractic Colleges (ACC) and the American Chiropractic Association (ACA) all made this initiative a primary focus in this Congress.

While falling short of ICA's goals (mandating military commissions for doctors of chiropractic, guaranteeing direct access to chiropractic services, and providing chiropractic benefits for military dependents and retirees), this potentially is a great step forward, albeit long overdue. For the historic record, legislation was passed in 1992 on the impetus of ICA to specifically authorize the commissioning of DCs as health care officers in the U.S. military. To date, no commissions have been issued.

The issue of military commissions for doctors of chiropractic is very important to the ICA. We see this status as a practical and symbolic goal. Commissioned officer status represents permanence. It confers professional peer status and official recognition that will serve as a signal to the greater world of the importance of chiropractic. Such status will greatly assist the chiropractic profession in providing quality, readily accessible chiropractic services to military personnel because of the authority it conveys. Equally important, the commissioning of DCs represents a growing understanding of the unique nature of chiropractic services and the separate and distinct nature of chiropractic care, quite apart from the standard medical model. This remains our top priority, for all the right reasons.

The recently enacted DoD provisions will require careful observation by the chiropractic profession and close coordination with chiropractic's friends in Congress. Too much discretion will rest in the hands of DoD policymakers and, as we have seen in other government departments, that discretion has always been applied to chiropractic's detriment, not in the even-handed, objective manner which Congress intended.

That, however, is the extent of the good news. The bad news is that legislation was enacted - the Veterans Millennium Health Care Act, which charged the U.S. Department of Veterans Affairs with devising a policy on chiropractic access for DVA beneficiaries. ICA did not support this vague

instruction for the very reasons we have now seen become a reality. Left without specific mandates to hire DCs and deploy them in DVA facilities, to establish a chiropractic outpatient benefit and to integrate chiropractic into the patient education and inter-professional systems of the agency, the medically dominated and hostile officials in the DVA developed a policy that handed chiropractic not just a defeat, but a grotesque insult.

As of May 2000, this official policy for chiropractic services in the DVA is to provide access only upon the prescription or referral from a medical doctor and then only for "musculoskeletal" conditions. This is a disaster for chiropractic and one from which we must mobilize as never before, if we are to recover. The danger is not limited to just veterans' programs.

The medical bias in federal agencies, combined with the drive to standardize benefits, means that if left unchanged, medical referral for musculoskeletal conditions only is likely to become the new standard to which other federal programs will be revised including Medicare. We have recently seen too many Medicare HMOs make chiropractic care by referral only. The recently enacted "inclusion" in military health care programs does not include mandated direct access and is likely to be by referral only; the current DVA policy is chiropractic by MD referral only. Regular Medicare is the logical next step.

The ICA is issuing a public call to organizations in the chiropractic profession to gather in an unprecedented "war council" to plan the introduction and organize the passage of legislation to correct this dangerous policy in the U.S. Department of Veterans Affairs as the top priority in the new Congress that will gather in Washington next January. ICA's vital points of concern were outlined in testimony I presented on ICA's behalf at the October 3rd hearing before the Health Subcommittee of the U.S. House Committee on Veterans Affairs. The full text of that statement is available on ICA's web site at <http://www.chiropractic.org>. ICA stands by these key points, and we feel that those minimum gains will have the support of the entire profession.

Chiropractic needs to mobilize, plan, and apply every means we can devise to establish chiropractic as a political force to be reckoned with in the new Congress. The October 3rd hearings have provided an excellent foundation for what needs to be done. This historic hearing revealed a strength and depth of Congressional support for a fair chiropractic benefit in the DVA that even some of us very close to the legislative process had underestimated. We need to build on this hearing record and what it means, but an exciting, positive hearing is not a victory: it is just a start.

In light of the recently published calls for "unity" issued by the American Chiropractic Association, we at the ICA believe that a working effort on this key issue, combining the energies of ICA and ACA to address this legislative challenge, is a worthy and logical joint venture. ICA is not in favor of wasting very scarce organizational resources on chasing some illusive structural merger.

Chiropractic's enemies are at the gates. All of our energy and focus is needed to keep practicing chiropractors in business. We are willing and eager to cooperate in a collective campaign to defend chiropractic's vital interests. Legislation to correct the current Department of Veterans Affairs' policy on chiropractic is a vital professional interest. Let's start there.

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