

American Chiropractic Association Testifies Before Congress On Federal Employee Access to Chiropractic Care

Editorial Staff

Washington, DC -- At the request of senior lawmakers in the House of Representatives, the chairman of the board of the American Chiropractic Association (ACA), David J. Redding, D.C., testified before a congressional subcommittee last week that ACA is committed to working with Congress to "provide federal employees and their dependents continued access to chiropractic care."

The comments were delivered by Dr. Redding as part of ACA's official testimony before the House Subcommittee on Compensation and Employee Benefits. ACA was invited to testify on legislation to reform the federal employees health benefit plans (FEHBPs) system. Authored by Subcommittee Chairman, Gary Ackerman (D-NY), the bill, H.R. 4958, would significantly alter the program which provides over 9-million civil servants and their dependents with health insurance. As such, it is the single largest employer-based health care system in the nation.

Mr. Ackerman's subcommittee has identified several problems with the health insurance system. Existing FEHBP coverage is often confusing to federal employees and its current value is estimated to be, on average, worth \$1,100 less than private workers' health insurance. Problems such as "adverse selection, wide variances in the value of benefits to premiums, and a complicated melange of 26 fee-for-service options," have rendered the system "less than optimal," Dr. Redding testified. He concluded that "H.R. 4958, by simplifying the system to include a single two-option plan of benefits, will eliminate these deleterious conditions."

It is unclear, however, whether the benefits package proposed in Mr. Ackerman's legislation would continue coverage of chiropractic services. On this point, Dr. Redding noted "(a)t present, 20 of the 26 fee-for-service plans cover chiropractic care as do 104 of the prepaid (HMO/PPO) plans. Federal employees also enjoy chiropractic coverage under federal workmen's compensation," he noted. "Since chiropractic services are 'highly valued and utilized' under both these programs, failure to ensure its coverage under H.R. 4958 would indeed be tragic."

ACA has recommended that H.R. 4958 be amended to cover, explicitly, the services of doctors of chiropractic. If the bill remains silent on the provision of DC services, future interpretations may lead to its exclusion.

Dr. Redding also testified in favor of adding a freedom-of-choice of health care provider clause to the bill. Such a clause would entitle federal workers to unencumbered choice of licensed providers for the performance of covered services. As currently drafted, H.R. 4958 would not permit this practice.

ACA's support for the concept of freedom-of-choice has been long-standing. In 1975, the ACA House of Delegates passed a resolution committing the organization to work for guaranteed free choice in all health insurance systems. In 1987, this commitment led to the unanimous passage of

legislation in the House of Representatives giving federal employees the freedom to select DCs for FEHBP covered services. Unfortunately, that bill died due to Senate inaction.

"The attractiveness of (the freedom-of-choice) approach lies mainly in its expansion of access to care without mandating additional services," Dr. Redding reasoned. "New services would not be mandated; rather, the pool of providers---would be increased."

To assuage congressional fears regarding the alleged high cost of chiropractic care, Dr. Redding introduced, into the subcommittee record, two recent cost analysis studies. The Foundation for Chiropractic Education and Research's 1988 analysis of Florida workers' compensation cases, and the 1990 British Medical Journal's chiropractic trial were submitted for the subcommittee's consideration. Both studies found chiropractic care more effective and less expensive than medical care for the treatment of low back pain.

These studies "prove that chiropractic is more effective" than medicine for back-related injuries, Dr. Redding reported. He urged Congress to "carefully consider these findings as it continues to address reform of FEHBP."

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