

## **ACA Works with Senator Mitchell to Push Chiropractic Study in Omnibus Reconciliation Act through Congress**

Dynamic Chiropractic Staff

Washington, D.C. -- An important piece of legislation dealing with chiropractic coverage under Medicare has been included in the 1990 Omnibus Reconciliation Act, at the urging of the American Chiropractic Association (ACA) and Senate Majority Leader George Mitchell (D-ME).

The bill which President Bush signed on November 4 will require the Secretary of Health and Human Services (HHS) to "study the availability of Medicare-covered chiropractic services to Health Maintenance Organization (HMO) enrollees and the arrangements and types of practitioners involved in furnishing such services." Since chiropractic was first included in Medicare, beneficiaries have been denied access to chiropractic care through HMOs.

"This action is the result of recent meetings in Portland, Maine and Washington, D.C., between (ACA) officials and Senator Mitchell's office," said Richard Miller, ACA director of governmental relations. Present at the meetings were ACA officials, including Kurt Hegetschweiler, D.C., chairman of the Commission on Legislation; Robert P. Lynch Jr., D.C., Maine delegate; Paul M. Begich, counsel for the Minnesota Chiropractic Association; Louis Sportelli, D.C.; and Dennis Shedd, ACA legislative consultant.

Following the meetings with ACA representatives, Senator Mitchell wrote a letter to HHS Secretary Louis W. Sullivan, D.C., urging him to clarify Health Care Financing Administration's (HCFA) position on covering manual manipulation of the spine for HMO and Competitive Medical Plan (CMP) beneficiaries.

"I am writing to express my concern about Medicare coverage for manual manipulation of the spine to correct a subluxation for beneficiaries enrolled in HMOs and CMPs," Senator Mitchell wrote in the October 2 letter.

"The only service of chiropractors recognized as a physician service under Medicare is the manual manipulation of the spine to correct subluxation," Senator Mitchell continued in his letter. "All Medicare beneficiaries, including those enrolled in managed care, are entitled to this benefit. I am concerned about reports which indicate that these benefits may not be available to beneficiaries enrolled in certain HMOs and CMPs."

"It is evident from the high levels of leadership which offered this language that ACA's legislative team continues to build credibility and authority as the profession's spokesman," said Dr. Hegetschweiler. "The fact that HHS is now required to undertake a study of this issue should help ensure that beneficiaries obtain long-overdue chiropractic benefits."

The study will be based on contracts entered into or renewed on or after January 1, 1991, and before January 1, 1993. HHS Secretary Sullivan is also required to submit an interim report to the House Committees on Ways and Means, and Energy and Commerce; and the Senate Committee on

Finance by January 1, 1992. A final report, including recommendations on changes needed to assure HMO enrollees' access to Medicare-covered chiropractic services, must be submitted by January 1, 1993.

DECEMBER 1990