

COMMENTS ON BEHALF OF THE
AMERICAN CHIROPRACTIC ASSOCIATION

SUBMITTED TO
CITIZENS HEALTH CARE WORKING GROUP
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Virtually all informed observers agree that America's health care delivery system could be vastly improved by finding reasonable and effective ways to significantly:

- Expand access to health care services by those with little or no regular access to comprehensive health care services;
- Reduce the current high cost of health care services and health care insurance coverage, and limit future cost increases of both to rates that more closely match the overall inflation rate of the nation's economy;
- Improve the quality and effectiveness of the health care services being delivered.

Linked with any efforts to address the above, the American Chiropractic Association believes our overall health care delivery system must undergo a broad transformational change – *a paradigm shift*—away from the current system, which is mainly oriented towards providing care for those who have already become seriously ill, to a more forward-thinking and progressive system that has as its main focus disease prevention, early disease detection, and positive lifestyle changes. This can be accomplished by providing wellness care to help people achieve significant and meaningful improvements in their overall health status and quality of life and to help maintain those improvements throughout their lifetimes.

Given the high cost of providing health care generally, the undeniably high incidence of preventable disease that exists, coupled with America's rapidly aging population -- it would seem logical as well as imperative that we move towards a wellness model of care as the primary and favored model of health care delivery as rapidly as possible.

America's doctors of chiropractic – *over 60,000 in number* – are especially well suited to play an integral role in any shift to a delivery system that is appropriately focused on the delivery of wellness care.

Doctors of chiropractic typically employ a holistic approach to the treatment of illness, with an appropriate emphasis on wellness concepts that involve diet, nutrition, exercise, and positive lifestyle changes such as smoking cessation measures. Doctors of chiropractic employ a non-surgical and non-pharmaceutical approach to health care that utilizes “spinal manipulation” to treat a range of neuromusculoskeletal conditions. The range of conditions treated typically includes: back pain, neck pain, pain in the joints of the arms or legs, and headaches; conditions that the vast majority of Americans will experience one or more times during their lives. In terms of national significance, the cost to society of treating back pain alone is estimated to exceed \$50 billion dollars annually.

Doctors of chiropractic are educated and trained to diagnose patients by taking a detailed medical history coupled with a physical exam and inspection. When appropriate, the use of diagnostic tools such as x-ray, MRI, ultrasound, and other diagnostic techniques are employed. Cost savings, including the avoidance of unnecessary surgeries and the reduced use of prescription medications, is one of the major benefits to the utilization of chiropractic care. As chiropractic treatment does not involve the use of drugs or surgery, the treatment is not only cost-effective, but is also low-risk. Complications are rare and patient satisfaction with chiropractic care is typically higher than care being offered by other providers attempting to treat similar conditions by other means, such as “traditional” medical care.

Doctors of chiropractic are educated in fully accredited colleges and universities in a post graduate environment, and receive the equivalent of a four-year clinical doctorate degree. Doctors of chiropractic must also successfully complete a series of national board examinations administered by the National Board of Chiropractic Examiners in order to be considered for licensure in any state. Doctors of chiropractic are licensed to practice in all fifty states, and in 41 states are allowed by law to use the term “physician” in

describing their services. By statute, doctors of chiropractic are defined as “physicians” in the federal Medicare program for the delivery of certain specified services. Via congressional action, doctors of chiropractic are also employed in the Department of Defense (*DoD*) health care system and in the Department of Veterans Affairs (*DVA*) health care system, serving at major treatment facilities and hospitals with appropriate staff privileges.

Over the years, chiropractic care has grown in popularity with consumers. It is estimated that doctors of chiropractic treat over 30 million people annually. Today, next to medical doctors and dentists, doctors of chiropractors comprise the largest number of doctorate level, portal-of-entry, primary-care providers in the nation. Unfortunately, many decision makers involved in the delivery of care or the provisioning of health insurance services continue to view chiropractic care as an “add on” cost, or an “optional” service to be offered consumers. Such views do not appropriately take into account the substitution effect of offering chiropractic care (*chiropractic care substituting for more expensive surgical and pharmaceutical care, etc.*) nor do they take into account savings and societal benefits such as improved job-performance, productivity and improved quality of life often achieved via chiropractic intervention. In a reoriented health delivery system -- *one that places an appropriate emphasis on wellness care* – chiropractic care would rightly be viewed as an essential element of any health plan seeking to provide an adequate range of health care services.

Returning to the existing health care delivery system, we note that many health plans claim to offer a full-range of “quality” health care services. We assert, without qualification, that no plan can truly be said to offer a full-range of quality and efficacious health care services without including reasonable access to chiropractic care. We believe that it is abundantly clear that any plan that does not incorporate reasonable access to chiropractic care as a basic covered benefit is shortchanging the consumer public and is falling well short of any claim that the plan offers the highest quality care possible.

Decision makers with influence over the current and any future health delivery system should seek to fully integrate chiropractic care into the delivery system, with the goal to fully exploit chiropractic's potential to:

1. Save the system money by providing care that is often more cost-effective than traditional care offered;
2. Increase the quality of health care offered;
3. Improve patient outcomes and levels of patient satisfaction;
4. Expand patient treatment options and choice of provider;
5. Improve the overall health status and quality of life of the public by providing an effective, holistic wellness approach to health care;
6. Reduce medical errors and improve patient safety (*chiropractic care is inherently safer and less complicated in comparison to the use of surgical intervention, hospital stays, and the use of pharmaceuticals*);
7. Expand the nation's capacity to deal with a major healthcare emergency.

The American Chiropractic Association is pleased to offer these views to the Working Group and we would be pleased to provide the Working Group with any additional information requested. To augment this brief presentation, included as an attachment are reference materials that provide additional background information regarding the chiropractic profession.



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