

February 25, 2008

April McMorris
Insurance Quality Analyst
American Chiropractic Association
1701 Clarendon Boulevard
Arlington, VA 22209

Dear Ms. McMorris:

Thank you for your letter regarding Tufts Health Plan's policy regarding spinal manipulation for children less than 12 years of age. As you are aware, Tufts Health Plan will not cover these services as of January 1, 2008. Tufts Health Plan's Medical Affairs Medical Policy Committee based this decision on a thorough review of the medical literature. At this time, the Committee determined that there is insufficient evidence supporting the safety and efficacy of spinal manipulation in this age group.

To summarize briefly, the Committee reviewed the following studies. Fallon (1997), Froehle (1996), and Sawyer et al. (1999) found that chiropractic manipulation for acute otitis media was of inconclusive efficacy. In addition, Balon et al. (1998) determined that spinal manipulation is not beneficial for children who have mild to moderate asthma. In a study investigating the effect of spinal manipulation on infantile colic, Olafsdottir et al (2001) found no difference between this intervention and placebo.

Moreover, pediatric safety data in relation to spinal manipulation is lacking. In a systematic review of the topic, Vohra and Johnston (2007) found that all serious adverse events from spinal manipulation occurred in children under 12 years of age. Ruge et al. (1988) published evidence of a strong correlation between immaturity of the spine and the severity of spinal cord injury resulting from spinal manipulation.

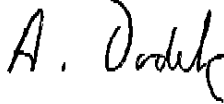
Of additional concern, chiropractors have relatively little training in the care of children. Adams et al. (2006) reported a chiropractor survey in which 78% of respondents indicated that their training included one semester or less of formal pediatric education and 72% received minimal or no pediatric clinical training.

Given the current state of the medical literature, the safety and effectiveness of spinal manipulation in children is not established. In the future, Tufts Health Plan may also consider requiring a pediatric referral for members age 13 to 18 years for chiropractic care. The Medical Affairs Medical Policy Committee reviews coverage on a monthly basis and would be willing to revisit this issue as more peer reviewed medical literature becomes available.



Attachment 3

Sincerely,



Anton B. Dodek, MD
Medical Director, Pediatrics, Pharmacy

Cc: Allen Hinkle, MD
Chief Medical Officer

Miriam Sullivan
Vice President, Allied Health and Pharmacy Services

Adams D, Amernic H, Humphreys K, et al. A survey of complementary and alternative medicine practitioners' knowledge, attitudes, and behavior regarding children in their practice. Paper presented at: Pediatric Academic Society Meeting; San Francisco, CA; April 29-May 2, 2006

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Durant CL, Verhoef MJ. Chiropractic treatment of patients younger than 18 years of age: Frequency, patterns and chiropractors' beliefs. 2001;6(7):433-8.

Fallon J.M.: The role of the chiropractic adjustment in the care and treatment of 332 children with otitis media. *J Clin Chiro Peds* 2. 167-183.1997;

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Sawyer C.E., Evans R.L., Boline P.D., et al: A feasibility study of chiropractic spinal manipulation versus sham spinal manipulation for chronic otitis media with effusion in children. *J Manip and Physiol Ther* 22. 292-298.1999

Vohra S, Johnston BC, Humphreys K. Adverse events associated with pediatric spinal manipulation: a systemic review. *Pediatrics* 119 (1): 275-283. January 2007