October 19, 2012

The Honorable Kathleen Sebelius  
Secretary  
United States Department of Health and Human Services  
Immediate Office of the Secretary  
200 Independence Avenue, SW  
Washington, DC 20201

Dear Madam Secretary:

The American Chiropractic Association (ACA) is a professional society composed of doctors of chiropractic (DC) whose goal is to promote the highest standards of ethics and essential patient care, contributing to the health and wellbeing of millions of patients. The ACA is the largest association in America representing the chiropractic profession.

I write today on behalf of the ACA regarding implementation of a very important provision of the Patient Protection and Affordable Care Act (PPACA). As you are aware, late last year, the Department of Health and Human Services (HHS) issued guidelines allowing states to choose their own essential health benefits standard—known as a “benchmark” plan—from among ten existing plans in each state. As you also know, states must have these benchmark plans approved by HHS and many states have begun the process of submitting these benchmarks to the Department.

ACA’s concerns are twofold: one, we believe that some states will pick plans that are less than robust, which is in direct contradiction of congressional intent; and, very importantly, states may be submitting benchmarks that would be inconsistent with provisions of PPACA, most notably §2706, non-discrimination in health care. In fact, we have reason to believe that several states have taken just such an action, having allowed little to no input from the chiropractic community during their deliberations.

Fundamentally, §2706 prevents plans created under the new exchanges and many plans outside the exchanges, from arbitrarily excluding the participation and coverage of categories of providers in their health plans, when this participation is within their scope of practice and licensure. §2706 guarantees that the availability of essential services provided by a Doctor of Chiropractic, and other providers, is equal to the availability of traditional medical care in all federally established or regulated plans in the new exchanges, and that any discriminatory policies adverse to patients and providers are eliminated.

Not only is this prohibition of discrimination required by PPACA, it will also further the goals of healthcare reform and be beneficial to the delivery system of the future. Doctors of chiropractic and other providers will help to serve newly-covered consumers in the system, and help address the cost
problem that plagues the current system and threatens any new system. Studies have shown that services provided by doctors of chiropractic do not add to the cost of treatment, but rather reduce the overall cost of care.

I would also note that discrimination against providers is also discrimination against patients. Discrimination against the services provided by doctors of chiropractic and other providers unduly and unlawfully restricts the patient’s ability to select the provider, and the service, of his or her choice. Now, when the patient-centered healthcare delivery system of the future is being formed, is not the time to limit patient choice of appropriately licensed and credentialed providers.

For all these reasons, we respectfully request that as you evaluate the states’ benchmark plans, you explicitly use adherence to §2706 as one of your criteria. I would also urge that you notify all states that adherence to §2706 is vital.

I thank you in advance for your attention in this regard. Please feel free to contact me at any time regarding the views of the American Chiropractic Association as stated above.

Sincerely,

Keith Overland, DC, CCSP, FICC
President