Providing access to chiropractic services in Medicare removes barriers to care, levels the playing field for physicians, supports beneficiaries.

- Medicare arbitrarily limits seniors’ access to chiropractic services

Medicare limits the services doctors of chiropractic (DCs) are allowed provide or order for their patients. This limitation has persisted for nearly 50 years with no scientific or valid policy basis.

- Medicare policy is an unlevel playing field for chiropractors treating their patients

DCs are currently not allowed to provide existing, covered, Medicare services that fall within their scopes of practice. This artificial limitation restricts chiropractors from providing their patients a continuity of care as they age into Medicare, putting beneficiaries at a distinct health disadvantage.

- Patients face delays, higher health care costs to obtain covered Medicare chiropractic services

Beneficiaries seeking to obtain chiropractic care, MUST FIRST obtain certain services from another provider in order to have them covered by Medicare. This requires the beneficiary to experience delays, inconveniences and the added expense (copays, time, travel, etc.) of seeing a second provider when such visits are unnecessary. If a DC determines that the beneficiary needs an x-ray, laboratory test or other diagnostic procedure, current policy does not allow DCs to “order” those covered services, and thus, in those instances, further unnecessary visits and beneficiary expenses are required in order to obtain the needed “order” from a second Medicare provider who will often turn around (especially in the case of diagnostic imaging, for example) and order the service from a third Medicare provider.

- Patients could face more costly or higher-risk procedures that are often unnecessary

Because Medicare’s chiropractic policy is stuck in 1972-era health policy, patients are, in effect, channeled to other providers whose standard treatment regimen may involve the use of drugs, spinal injections, or surgery for a range of spinal conditions. Chiropractic care has shown to be a less costly and safer alternative in many of these situations and are routinely covered by private insurance and Medicaid.
• **Chiropractic services are part of the answer to the opioid crisis**

As policymakers seek to prevent the use of unnecessary drugs and surgery, DCs are poised to assist in the opioid effort by lowering the reliance on those drugs, especially in cases related to spinal related pain. To the extent that current policy arbitrarily restricts access to chiropractic services, it exacerbates these problems.

• **Medicare policy ignores appropriate state licensing authority of health care providers**

Doctors of chiropractic are licensed in all 50 states as portal-of-entry providers who treat the “whole body” and whose scope of practice as defined by state law in every state, allows for the provisioning of a broad range of services. A typical state scope recognizes the ability and training of DCs to examine, diagnose, treat and refer patients.

• **Correcting current Medicare policy as it relates to chiropractic services would add no new services (not currently covered) by Medicare**

This legislation would not add any new reimbursable services to Medicare that are not already covered by existing providers. This bill simply seeks a modification of existing statute to ensure that doctors of chiropractic are allowed to provide and order “existing covered services” which they are currently lawfully permitted to do under state law.

**ACTION NEEDED**

To correct this disparity, in the 116th Congress Reps. Brian Higgins (D-N.Y.) and Tom Reed (R-N.Y.), have introduced **HR 3654**, the Chiropractic Medicare Coverage Modernization Act, bipartisan legislation to allow Medicare beneficiaries full access to current services chiropractors are allowed to provide under their state licensure. Access to chiropractic services in Medicare removes barriers to care, reduces costs, and is in the best interest of beneficiaries. Members of the U.S. House are urged to contact Rep. Higgins’ office, or Rep. Reed’s office, and offer to **co-sponsor HR 3654**.

**Members of the Senate** are urged to consider introducing a companion bill to **HR 3654** and increase the likelihood of the bill passing this year.

**For Additional Information Please Contact:**

The American Chiropractic Association  
Department of Public Policy and Advocacy  
703-812-0228  
www.acatoday.org  
ppa@acatoday.org