Chairman Doggett, Ranking Member Nunes and members of the Subcommittee:

On behalf of the American Chiropractic Association (ACA), representing the nation’s doctors of chiropractic and the patients they serve, thank you for the opportunity to submit this statement for the record regarding your hearing titled, “Charting the Path Forward for Telehealth.”

Doctors of chiropractic (DCs) are primary-contact healthcare providers who provide essential care, including, but not limited to, managing acute and urgent musculoskeletal conditions. These services are critical for helping people who may otherwise unnecessarily end up in emergency rooms, worsening an already strained situation during the pandemic. It is important to note that chiropractors help many people who do physically demanding and stressful work, such as healthcare providers, first responders, and even truck drivers who ensure that America’s healthcare and food supplies get to where they are needed during the COVID-19 pandemic.

While DCs are licensed under state law to be primary-contact healthcare providers, under federal Medicare law, patients can only access our doctors for a single service, despite what their state law may allow (Social Security Act §1861(r)5).

Patients deserve access to the physicians and healthcare providers of their choice. Doctors of chiropractic should have the ability to practice to the full scope of their state license for Medicare patients via telehealth services under Section 1834(m)(4)(F) of the Social Security Act. In response to the former Administration’s direction, changes in regulation have already been made to expand the use of telehealth services around the country. ACA believes that further expansion, allowing Medicare beneficiaries access to their doctor of chiropractic for telehealth services, is consistent with the Administration’s message and in the best interest of America’s seniors.

On April 19, 2021, The Chiropractic Medicare Coverage Modernization Act (H.R. 2654) was reintroduced and would allow Medicare beneficiaries access to the chiropractic profession’s broad-based, nondrug approach to pain management, which includes manual manipulation of the spine and extremities, evaluation and management services, diagnostic imaging and utilization of other nondrug approaches that have become an important strategy in national efforts to stem the epidemic of prescription opioid overuse and abuse. This legislation should also allow beneficiaries to access their chiropractor through telehealth services.
Currently, some providers, such as physical and occupational therapists, can furnish telehealth services using Current Procedural Terminology (CPT®) codes also utilized by doctors of chiropractic. Additionally, certain Healthcare Common Procedure Coding System (HCPCS) codes have also been made available to those provider groups. CPT® codes 98966, 98967 and 98958 and HCPCS codes G2010 and G2012 can and are reported by chiropractors. The exclusion of a single provider group eligible to bill the same codes and provide the same or similar services is detrimental to patient freedom of choice and quality of care.

ACA has requested that CMS waive current federal regulations in order to grant full recognition and authority to doctors of chiropractic to provide telehealth services to Medicare beneficiaries during this public health emergency under Section 1135 of the Social Security Act, which provides in part the following:

**AUTHORITY TO WAIVE REQUIREMENTS DURING NATIONAL EMERGENCIES**

Sec. 1135. [42 U.S.C. 1320b–5] (a) Purpose.—The purpose of this section is to enable the Secretary to ensure to the maximum extent feasible, in any emergency area and during an emergency period (as defined in subsection (g)(1))—(1) that sufficient health care items and services are available to meet the needs of individuals in such area enrolled in the programs under titles XVIII, XIX, and XXI; and (2) that health care providers (as defined in subsection (g)(2)) that furnish such items and services in good faith, but that are unable to comply with one or more requirements described in subsection (b), may be reimbursed for such items and services and exempted from sanctions for such noncompliance, absent any determination of fraud or abuse.

(b) Secretarial Authority.—To the extent necessary to accomplish the purpose specified in subsection (a), the Secretary is authorized, subject to the provisions of this section, to temporarily waive or modify the application of, with respect to health care items and services furnished by a health care provider (or classes of health care providers) in any emergency area (or portion of such an area) during any portion of an emergency period, the requirements of titles XVIII, XIX, or XXI, or any regulation thereunder (and the requirements of this title other than this section, and regulations thereunder, insofar as they relate to such titles)...

Doctors of chiropractic have education, training and experience that can benefit many patients in this time of national need, while also helping to lessen the strain on frontline providers during the COVID-19 pandemic. We stand ready to do so. But first, we request that federal barriers be removed so that we may serve patients consistent with the practice privileges granted to us under our respective state licenses. If you wish, we are available to speak in more detail about how members of the chiropractic profession can be of greater service now and in the future.

Sincerely,

Michele Maiers, DC, MPH, PhD
President