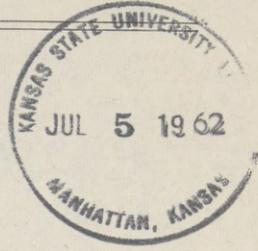


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AMEND THE FEDERAL EMPLOYEES' COMPENSATION ACT

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HEARING BEFORE THE SUBCOMMITTEE ON LABOR OF THE COMMITTEE ON LABOR AND PUBLIC WELFARE UNITED STATES SENATE

EIGHTY-SEVENTH CONGRESS
SECOND SESSION

ON

S. 1055 and S. 1322

TO AMEND THE FEDERAL EMPLOYEES' COMPENSATION ACT

MAY 24, 1962

Printed for the use of the Committee on Labor and Public Welfare



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AMEND THE FEDERAL EMPLOYEES
COMPENSATION ACT



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AMEND THE FEDERAL EMPLOYEES' COMPENSATION ACT

THURSDAY, MAY 24, 1962

U.S. SENATE,
SPECIAL SUBCOMMITTEE
ON FEDERAL EMPLOYEES COMPENSATION
OF THE COMMITTEE ON LABOR AND PUBLIC WELFARE,
Washington, D.C.

The subcommittee met at 10 a.m., pursuant to call, in room 4202, New Senate Office Building, Washington, D.C., Senator Quentin N. Burdick (chairman of the subcommittee) presiding.

Present: Senators Burdick (presiding) and Javits.

Committee staff members present: Edward D. Friedman, counsel, Special Subcommittee on Federal Employees Compensation; Raymond Hurley and George Denison, associate minority counsel.

Senator BURDICK. The subcommittee will come to order.

This morning we are holding hearings on two bills, on S. 1055, introduced by Senator Warren Magnuson of Washington, and S. 1322 which I introduced.

(S. 1055 and S. 1322 follow:)

[S. 1055, 87th Cong., 1st sess.]

A BILL To amend the Federal Employees' Compensation Act so as to permit injured employees entitled to receive medical services under such Act to utilize the services of chiropractors.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That the first two sentences of section 9 of the Federal Employees' Compensation Act, as amended (5 U.S.C. 759), are amended to read as follows: "For any injury sustained by an employee while in the performance of duty, whether or not disability has arisen, the United States shall furnish to the employee all services, appliances, and supplies prescribed or recommended by duly qualified physicians or chiropractic practitioners which, in the opinion of the Secretary of Labor, are likely to cure or to give relief or to reduce the degree or the period of disability or to aid in lessening the amount of the monthly compensation. Such services, appliances, and supplies shall be furnished by or upon the order of United States medical officers and hospitals, but where this is not practicable they shall be furnished by or upon the order of private physicians and hospitals, or chiropractic practitioners, designated or approved by the Secretary of Labor."

Sec. 2. Paragraph (e) of section 40 of such Act, as amended (5 U.S.C. 790), is amended to read as follows:

"(e) The term 'medical, surgical, and hospital services and supplies' includes services and supplies by osteopathic and chiropractic practitioners and hospitals as licensed by State law and within the scope of their practice as defined by State law."

[S. 1322, 87th Cong., 1st Sess.]

A BILL To amend sections 9 and 40 of the United States Employees' Compensation Act, as amended

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That the first two sentences of section 9 of the Act

entitled "An Act to provide compensation for employees of the United States suffering injuries while in the performance of their duties, and for other purposes", approved September 7, 1916, as amended (U.S.C., title 5, sec. 759), are amended to read as follows: "For any injury sustained by an employee while in the performance of duty, whether or not disability has arisen, the United States shall furnish to the employee all services, appliances, and supplies prescribed or recommended by duly qualified physicians or chiropractic practitioners, which, in the opinion of the Commission, are likely to cure or to give relief or to reduce the degree or the period of disability or to aid in lessening the amount of the monthly compensation. Such services, appliances, and supplies shall be furnished by or upon the order of the United States medical officers and hospitals, but where this is not practicable they shall be furnished by or upon the order of private physicians and hospitals, or chiropractic practitioners, designated or approved by the Commission."

Sec. 2. The sixth paragraph of section 40 of such Act, as amended (U.S.C., title 4, sec. 790), is amended to read as follows:

"The term 'medical, surgical, and hospital services and supplies' includes services and supplies by osteopathic and chiropractic practitioners and hospitals as licensed by State law and within the scope of their practice as defined by State law."

Senator BURDICK. These bills provide amendments to the U.S. Employees' Compensation Act which would have the effect of authorizing chiropractors to provide chiropractic services, upon request, within the scope of their practice as permitted and defined by the law of the States.

Under the bills the services of approved chiropractors would be available, upon request in those cases in which the services of the U.S. medical officers and hospitals are not available.

The Senate considered a bill somewhat similar to this during the 79th Congress, at which time it passed the bill. However, no action was taken in the House at that time.

Without objection, at this time, we will insert into the record departmental reports from the Department of Labor and the Department of Health, Education, and Welfare, and from the Bureau of the Budget.

(The reports follow:)

U.S. DEPARTMENT OF LABOR,
OFFICE OF THE SECRETARY,
Washington, June 21, 1961.

HON. LISTER HILL,
Chairman, Committee on Labor and Public Welfare,
U.S. Senate, Washington, D.C.

DEAR SENATOR HILL: This is in further reply to your request for our views on S. 1055 and S. 1322, bills to permit injured employees entitled to receive medical services under the Federal Employees' Compensation Act to utilize the services of chiropractors.

The Federal Employees' Compensation Act does not preclude the use of chiropractic services in appropriate cases. The services of chiropractors, physiotherapists, and other specialists may be used when recommended by and administered under the direction of a U.S. medical officer, or a duly qualified physician trained and licensed to practice medicine. Therefore, we see no need for amending the act specifically to permit the use of such services.

For this reason, we oppose enactment of S. 1055 and S. 1322.

The Bureau of the Budget advises that there is no objection to the presentation of this report from the standpoint of the administration's program.

Yours sincerely,

ARTHUR J. GOLDBERG,
Secretary of Labor.

EXECUTIVE OFFICE OF THE PRESIDENT,
BUREAU OF THE BUDGET,
Washington, D.C., August 11, 1961.

HON. LISTER HILL,
Chairman, Committee on Labor and Public Welfare,
U.S. Senate, Washington, D.C.

DEAR MR. CHAIRMAN: This is in reply to your letters of February 25 and March 17, 1961, requesting the views of this Office on S. 1055 and S. 1322, respectively, which would amend sections 9 and 40 of the Federal Employees' Compensation Act to permit the use of chiropractors.

The Secretary of Health, Education, and Welfare and the Secretary of Labor are recommending against enactment of these bills in reports being made to your committee.

In the light of the views expressed by these departmental reports, the Bureau of the Budget is unable to recommend enactment of these bills.

Sincerely yours,

PHILLIP S. HUGHES,
Assistant Director for Legislative Reference.

U.S. DEPARTMENT OF LABOR,
OFFICE OF THE SECRETARY,
Washington, May 23, 1962.

HON. LISTER HILL,
Chairman, Committee on Labor and Public Welfare,
U.S. Senate, Washington, D.C.

DEAR SENATOR HILL: We understand that a special subcommittee of the Senate Committee on Labor and Public Welfare has scheduled hearings on S. 1055 and S. 1322, bills to amend the Federal Employees' Compensation Act so as to permit injured employees entitled to receive medical services under such act to utilize the services of chiropractors. While we do not wish to offer testimony at this time, we would like to take this opportunity to augment the comments on these proposals set forth in our report dated June 21, 1961.

These bills would amend sections 9 and 40 of the Federal Employees' Compensation Act to grant statutory authority to chiropractic practitioners, within the scope of their practice as defined by State law, to participate on an equality with doctors of medicine and osteopathic physicians in the treatment of beneficiaries under the act.

We are opposed to enactment of these bills. Treatment of Federal employees who sustain personal injury in the course of their employment generally involves the use of medications, surgery, or orthopedic attention. The welfare of these injured employees and the proper medical treatment of their injuries demand that their treatment be under the direction of the best qualified medical personnel obtainable to render this service. They must be licensed to prescribe medications for the relief of pain, to prevent or control infection and to promote healing. This includes the use of drugs, sedatives and antibiotics.

In general, chiropractors, where licensed to practice under State law, are restricted to the practice of their particular theory of healing by drugless methods. Among the limitations in State laws relating to the licensing of chiropractors are prohibitions against the practice of surgery and the administration or prescription of drugs or medicines. In addition to such statutory limitations, they generally do not have hospital privileges.

As stated in our previous report, the Federal Employees' Compensation Act does not preclude the use of chiropractic services in appropriate cases. The services of chiropractors, physiotherapists and other specialists may be used where recommended by and carried out under the direction of a U.S. medical officer or a duly qualified physician trained and licensed to engage in the practice of medicine. In view of this fact, it is not necessary to amend the act to permit the use of such services.

The Bureau of the Budget advises that there is no objection to the presentation of this report from the standpoint of the administration's program.

Yours sincerely,

ARTHUR J. GOLDBERG,
Secretary of Labor.

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE,
Washington, August 17, 1961.

HON. LISTER HILL,
Chairman, Committee on Labor and Public Welfare,
U. S. Senate, Washington, D. C.

DEAR MR. CHAIRMAN: This letter is in response to your requests of May 23 and July 18, 1961, for reports on S. 1322, a bill "To amend sections 9 and 40 of the U.S. Employees' Compensation Act, as amended" and S. 1055, a bill "To amend the Federal Employees Compensation Act so as to permit injured employees entitled to receive medical services under such act to utilize the services of chiropractors."

The bills would amend the first two sentences of section 9 of the Federal Employees' Compensation Act to read as follows (italic matter being new): "For any injury sustained by an employee while in the performance of duty, whether or not disability has arisen, the United States shall furnish to the employee all services, appliances, and supplies prescribed or recommended by duly qualified physicians or *chiropractic practitioners*, which, in the opinion of the Secretary of Labor, are likely to cure or to give relief or to reduce the degree of the period of disability or to aid in lessening the amount of the monthly compensation. Such services, appliances, and supplies shall be furnished by or upon the order of the U.S. medical officers and hospitals, but where this is not practicable they shall be furnished by or upon the order of private physicians and hospitals, or *chiropractic practitioners*, designated or approved by the Secretary of Labor." (S. 1322 refers to the "Commission" instead of the Secretary. The U.S. Employees' Compensation Commission was abolished some years ago.)

The bills would also amend subparagraph (e) or section 40 of the act to read as follows: "The term 'medical, surgical, and hospital services and supplies' includes services and supplies by osteopathic and *chiropractic* practitioners and hospitals as licensed by State law and within the scope of their practice as defined by State law."

These amendments would permit chiropractic practitioners with proper approval to provide services under the U.S. Employees' Compensation Act, for both diagnosis and treatment of injuries sustained by Federal employees in line of duty.

The Surgeon General is authorized under section 324 of the Public Health Service Act (42 U.S.C. 251) to provide medical, surgical, and hospital services and supplies for persons entitled to treatment under the Federal Employees' Compensation Act and extensions thereof. The Public Health Service has consistently taken the position—both for its own activities and otherwise—that the treatment of injury and disease is best provided by or under the direction and supervision of qualified physicians, and that diagnosis should be performed only by such physicians themselves.

The National Chiropractic Association has stated that chiropractic is "A system of therapeutics based upon the theory that disease is caused by interference with nerve function. It is based upon the premise that all systems and physiologic processes of the human body are coordinated by the nerve system; that interference with the nerve control of these systems impairs their function and induces dysfunction or disease by rendering the body less resistant to infection or to other exciting causes. Its therapeutics is designed to restore normal function of the nerve system by scientific manipulation, specific adjustment, clinical nutrition and physiotherapeutic treatment of the structures of the human body, especially those of the spinal column."

The theory of chiropractic does not take into account the scientifically established causes of disease. Its practice does not include the diagnosis of disease and injury by criteria and methods long established by the medical profession. Its therapeutics does not utilize the surgery, the materia medica, the radioactive agents, the chemotherapeutic drugs, or the antibiotics which together with immunological procedures and public health methods, also foreign to the chiropractor, have produced the present high levels of health in this country.

That there is much confusion as to the nature and alleged value of chiropractic is seen in the several States, in which State codes, statutes, and boards of licensure vary markedly in their definitions of chiropractic and the extent and scope of its practice which they permit.

Within the limits of State licensure, chiropractors traditionally diagnose and treat disease. It is the position of the Public Health Service that the diagnostic and therapeutic care of all persons suffering from disease or injury should be obtained by, through, and at the hands of physicians, and that any ancillary services to the patient, including all forms of physical medicine, should be obtained only on and by their recommendation and prescription.

For the reasons outlined above, we recommend against enactment of these bills. We are advised by the Bureau of the Budget that there is no objection to the presentation of this report from the standpoint of the administration's program.

Sincerely yours,

WILBUR J. COHEN, *Assistant Secretary.*

Senator BURDICK. Before calling witnesses, I would like to read a statement made by my colleague, the Honorable Warren Magnuson, on this legislation:

"STATEMENT OF HON. WARREN G. MAGNUSON, A SENATOR FROM THE STATE OF WASHINGTON

"First, I want to thank you and members of the committee for extending to me this opportunity to testify in favor of my bill, S. 1055. This measure would amend the Federal Employees' Compensation Act so as to permit injured employees entitled to receive medical services under such act to utilize the services of chiropractors. I have sponsored this proposal because I believe that in those States where chiropractic is a licensed healing profession, the individual choice on the part of the patient should prevail.

"The purpose of my bill is expressly to permit Federal employees who are injured in the performance of their duties and are entitled to receive medical service at Government expense under the Employees' Compensation Act, to utilize the services of chiropractors.

"Forty-six States, Puerto Rico, the District of Columbia, the Canal Zone, most provinces in Canada—all have licensing laws which recognize chiropractic as a healing profession.

"The public is utilizing services of chiropractors in ever increasing numbers. A large and growing number of people are convinced that the chiropractic method of treatment affords better means for the remedy and care of certain illnesses and injuries. Also, the chiropractic profession has been carrying on continuous and successful efforts to raise its educational requirements and professional standards.

"Many Federal employees suffering injuries utilize the services of chiropractors. The Government is penalizing those employees injured in performance of their duty by causing them to pay for chiropractic treatment—even when such treatment hastens the employees' return to duty and reduces the cost of the injury to the Government.

"It has been said that the Employees' Compensation Act gives the Commission discretion to permit the services of chiropractors to be utilized at Government expense. However, the Commission has so administered the law that the services of the chiropractor have to be recommended by a U.S. medical officer or a duly qualified physician. Experience has indicated that recommendation for chiropractic treatment is rarely, if ever, made by a medical doctor.

"The Employees' Compensation Appeals Board is consistently denying Government employees the services of chiropractors. I am personally familiar with a case of several years ago where an employee received treatment from a chiropractor. He went back to work promptly. The chiropractor's bill for professional services in the amount of \$6 was turned down for payment by the Federal Government. In deciding the case, the chairman of the three-man Appeals Board stated: 'If we can stay with the law as I understand it, I think your remedy is with the legislature.'

"The Appeals Board has consistently refused relief to Government employees, claiming that their remedy is with the legislature and that the present act denies a free choice of the healing arts.

"For the above reasons, Mr. Chairman, I have sponsored and am supporting S. 1055. I respectfully urge your committee to act favorably on it.

"Warren G. Magnuson, U.S. Senator."

I understand that the first witness will be John Creer, substituting for Paul Badger, from Washington.

Mr. Creer.

STATEMENT OF JOHN CREER, APPEARING FOR PAUL L. BADGER, WASHINGTON, D.C., FOR THE NATIONAL CHIROPRACTIC ASSOCIATION

Mr. CREER. My name is John Creer, and I am an attorney from Arlington, Va. I am substituting for Paul L. Badger, an attorney practicing law in the District of Columbia. The statement reads as follows:

PREPARED STATEMENT OF PAUL L. BADGER, ATTORNEY, WASHINGTON, D.C.,
PRESENTED BY JOHN CREER

I am particularly happy to appear before this committee because of the fact that I am a former member of this committee's staff. As such, I am well aware of the outstanding record, and the many forward-looking contributions which this committee has made down through the years in the field of social legislation. I am appearing before you today in behalf of the National Chiropractic Association. We support and urge the enactment of S. 1322, as introduced.

The National Chiropractic Association is a voluntary membership nonprofit corporation serving the chiropractic profession throughout the United States of America as a representative service organization. The chiropractic profession, as you know, is a major professional health service dedicated to serving the public. As such, it is vitally concerned with all of the implications of those provisions of the U.S. Employees' Compensation Act which are related to the standards of health care provided thereunder for injured and disabled Government employees.

The Burdick bill, S. 1322, proposes to amend the U.S. Employees' Compensation Act so that the services of chiropractors can be utilized in the care of injured and disabled Government employees who desire such care. This is not the first time legislation of this nature has been before Congress. In the 77th Congress, a bill was introduced in the House of Representatives by Congressman John H. Tolan, of California. That bill was favorably reported by both the subcommittee and the full Judiciary Committee of the House, which considered it. Unfortunately, action by the committee came so late in the session that no floor vote was taken on the legislation.

In the 79th Congress, Senator Abe Murdock of Utah introduced S. 178, which was identical to the present bill. Hearings were held by the Committee on Education and Labor of the Senate, under the chairmanship of Senator Fulbright, of Arkansas. That committee favorably reported the bill by a unanimous vote. The report was No. 1317 of the 79th Congress. The bill passed the U.S. Senate unanimously June 14, 1946. I should like to read parts of that report and offer some additional comments on the views taken by members of the Education and Labor Committee.

The report points out that the purpose of this legislation is expressly to permit Federal employees who are injured in the performance of their duties and are entitled to receive medical service at Government expense, under the Employees' Compensation Act, to utilize the services of chiropractors in those States, territories, and possessions of the United States where chiropractic is a licensed healing profession. Later, in the report, it was pointed out that in the States and the District of Columbia, and Puerto Rico chiropractic is a licensed healing profession. It was expressly stated that this legislation permitted treatment only to the extent and under conditions which chiropractors may practice in each State. It gives no authority for chiropractic to invade other areas of the healing arts—

and I might add, here, that members of the chiropractic profession have no desire to do so. But, what the report stresses, and I would like to further emphasize this point, is that State authority in this matter is recognized as it has been traditionally recognized in other related areas.

The report stresses another very pertinent point by showing that the present interpretation of the law acts in a discriminatory fashion toward Federal employees and licensed chiropractic practitioners.

During the hearings on the bills introduced in the 77th and 79th Congresses, several employee groups testified that chiropractic care was desired by certain employees whose duties are likely to incur injuries which respond to chiropractic care. The report refers to this testimony, and the members of the committee declared that they were impressed by the large number of people who stated they felt chiropractic treatment resulted in quicker relief and remedy and hastened their return to work.

I should like to add that it would seem evident that the present law is discriminatory against employees who desire chiropractic care since it denies them a basic American right, the freedom of choice in selecting the type of care or the physician of their choice when these Government employees sustain an injury while on duty.

It is now 16 years since that report was written. The statements made in it are still true—and some of them are doubly true. The committee made favorable comment on the manner in which the chiropractic profession was raising its standards. I am pleased to say that the professional standards and the educational requirements of the chiropractic profession have all been raised to even higher levels in these past 16 years.

The committee said that it was impressed by the fact that so large a number of people sought chiropractic care. Yet, I daresay that the number of people being served by chiropractic care today is double the number that it was when this report was written. The committee may be interested in knowing that during the past 5 years, hundreds of labor unions have negotiated contracts which included health benefits providing for chiropractic care of factory workers.

Many large industries have expanded their health insurance plans to include chiropractic care, when it was pointed out to them that this service was being denied their employees. In short, chiropractic is becoming more and more accepted by the American public as an essential healing art. We believe that it is time to modernize the law to end discrimination which exists. We should provide Government employees with the full range of care and treatment to which they are entitled when they sustain any disability while on duty. The employees themselves want such discrimination to end and they have indicated they want to have chiropractic treatment available when they have any type of injury which responds more readily to chiropractic treatment.

In conclusion, Mr. Chairman, I would like to add one further comment. I was an employee of the U.S. Senate when this bill's predecessor, S. 178, of the 79th Congress, was unanimously approved by the Senate. I was employed by Senator Elbert D. Thomas of Utah, who, as you know, was a member of this committee at that time, and its chairman for many years. If anyone had told me at that time that this same legislation would still be pending before the Congress almost a generation later, I would not have dared to believe them. But here we are today, and the same bill, unanimously approved by the Senate 16 years ago, is still waiting to be approved by the Congress of the United States.

It seems to me that this fact is almost incredible. Particularly because of the additional fact that during those intervening 16 years this committee has, as I have already indicated, considered and approved a long list of measures which have brought about many pioneering reforms in the field of social legislation—which have set new standards in many areas for local governments, industry, labor and public and private institutions to follow. Usually the Federal Government has been far in the forefront and has taken the lead in establishing standards governing working conditions, wages, and hours of employment, pensions, retirement compensation benefits, health care, pure food and drug laws, sanitation, water pollution regulations, fair employment practices, child labor laws, safety regulations and standards in many other areas—and industry, State and local governments, and private and public institutions have followed the Federal Government's leadership. But we are considering here today in this legislation a flagrant example of how the Federal Government has lagged far behind local governments, labor, industry, and many institutions by failing to afford its employees the right to choose the type of medical care which they prefer. It seems to me, therefore, that Uncle Sam should rectify this situation as quickly as possible and reassume the traditional role of leadership in this area that is rightfully his.

I trust, Mr. Chairman, that this committee will follow the suggestions and guidelines laid down by two previous congressional committees and report this legislation favorably. I respectfully request that Senate Report No. 1317 of the 79th Congress, from the Committee on Education and Labor, a copy of which is attached hereto, be incorporated in the record of the hearing at this point. Thank you.

Senator BURDICK. Without objection, the report will be included in the record.

(The report follows:)

[S. Rept. 1317, 79th Cong., 2d sess.]

AMENDMENT TO THE U.S. EMPLOYEES' COMPENSATION ACT

The Committee on Education and Labor, to whom was referred the bill (S. 178) to amend section 40 of the U.S. Employees' Compensation Act, as amended, having considered the same, report favorably thereon with amendments and recommend that the bill, as amended, do pass.

SUMMARY AND PURPOSE OF LEGISLATION

The purpose of the legislation is expressly to permit Federal employees who are injured in the performance of their duties and are entitled to receive medical service at Government expense, under the Employees' Compensation Act, to utilize the services of chiropractors in those States, territories, and possessions of the United States where chiropractic is a licensed healing profession.

According to testimony received by your committee the Employees' Compensation Act gives the Commission discretion to permit the services of chiropractors to be utilized at Government expense, but the Commission has so administered the law that the services of the chiropractor have to be recommended by a U.S. medical officer or a duly qualified physician, the latter term not being interpreted by the Commission to include chiropractic practitioner. The testimony indicates that recommendation for chiropractic treatment is rarely, if ever, made by a medical doctor.

The bill as introduced redefined the term "physician" as used in the Employees' Compensation Act to include chiropractic practitioners. This was objected to by the medical profession and in order to meet that objection the committee amended the bill to leave unchanged the definition of physician, but to permit employees to utilize the services of chiropractic practitioners.

In 43 States, the District of Columbia, Hawaii, and Alaska chiropractic is a licensed healing profession. The various legislative acts and administrative regulations of the States define the extent and conditions under which chiropractors may practice. It is your committee's conclusion that it is the responsibility of the States to determine who may practice the healing arts and that the Federal Government by limiting, in effect, the Federal employees' choice for treatment of injuries sustained in the performance of duty to a medical doctor and an osteopath is interfering with the State authority and is acting in a discriminatory fashion toward Federal employees and licensed chiropractic practitioners.

Several officers of national Government employee organizations strongly urged favorable action by your committee on this bill. According to their testimony many Federal employees suffering injuries utilize the services of chiropractors because they have found that the chiropractic methods of treatment of many injuries result in quicker relief and remedy. They contended that, in effect, therefore, the Government is penalizing them by causing them to pay for such treatment even though such treatment hastens the employees' return to duty and reduces the cost of the injury to the Government.

Representatives of the National Chiropractic Association testified that more than 20 million people throughout the United States utilized the services of approximately 20,000 chiropractic practitioners. Your committee is not competent, nor did it attempt, to investigate the professional qualifications and competency of the chiropractic profession. Nevertheless, your committee was impressed by the apparently large number of people who are convinced that the chiropractic method of treatment affords better means for the remedy and care of certain illnesses and injuries. Your committee was also impressed by the continuous and successful effort of the chiropractic profession to raise its educational requirements and professional standards.

In recommending the passage of this bill the committee is only reiterating the principle which the Senate has on many occasions affirmed, as it did most recently in passing the hospital survey and construction bill—the sovereignty of the State over these matters concerning which the State has traditionally exercised jurisdiction and in which it has demonstrated its competency.

Senator BURDICK. Sir, that was a very fine statement. I wonder if you might comment on some of the opposition that I have heard to this legislation, which takes this form: They contend that the present law authorizes the use of chiropractors in injuries sustained by Government employees.

Mr. CREER. Could I refer that question to Mr. Bunker, please?

Mr. BUNKER. With the permission of the chairman, I would ask that we be given the opportunity of presenting our statement now, and that the question be deferred until after our statement has been received, if there is no objection.

Senator BURDICK. Very well, you may proceed.

STATEMENT OF JAMES E. BUNKER, GENERAL COUNSEL, NATIONAL CHIROPRACTIC ASSOCIATION, WEBSTER CITY, IOWA

Mr. BUNKER. Thank you, sir.

Mr. Chairman, my name is James E. Bunker, general counsel of the National Chiropractic Association, and we appear today in support of S. 1055 and S. 1322. We have previously filed a statement which I would ask the committee to include in the record, and rather than repeat that statement at this time, I would like to comment generally and specifically with respect to a few items.

Senator BURDICK. Without objection, the statement will be included in the record.

(The prepared statement follows:)

PREPARED STATEMENT OF JAMES E. BUNKER, GENERAL COUNSEL, NATIONAL CHIROPRACTIC ASSOCIATION, WEBSTER CITY, IOWA

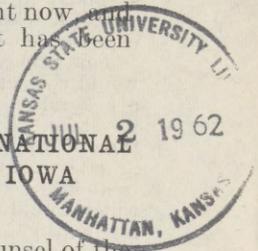
Mr. Chairman and gentlemen of the subcommittee, my name is James E. Bunker, Webster City, Iowa. I am general counsel of the National Chiropractic Association, a nonprofit corporation composed of voluntary membership, representative of the chiropractic profession nationally.

You have been given the legislative history of the amendment to the Federal Employee's Compensation Act proposed by S. 1055 and S. 1322. I will try to point out the concern of the chiropractic profession with regard to the amendment and offer some background information with respect to the profession itself.

Chiropractic is one of the four major healing arts professions and is so classified officially by the Federal Government along with medicine, osteopathy and dentistry. It differs from those three professions in that it is concerned primarily with the relationship between structure and function in the human body and the role of that relationship in the maintenance and restoration of health. It is concerned especially with the relationship between the spinal column and the nervous system and its practices are conducted without the use of drugs and surgery. Thus, it is peculiarly appropriate and has been found most helpful in dealing with cases of trauma such as strains, sprains and the like.

Doctors of chiropractic are licensed to practice in 47 States including the District of Columbia and the educational requirements are high. A full 4-year course of professional training is required which includes the so-called basic sciences, anatomy, physiology, pathology, bacteriology and chemistry, together with the clinical subjects of the chiropractic school. About one-half the States or more require 1 or 2 years of college training in addition to the professional training. Educational standards are constantly being elevated.

The effectiveness of chiropractic therapy is best evidenced by the substantial portion of the population which seeks the services of doctors of chiropractic in ever-increasing numbers. We all know that if these services were ineffective,



persons who are sick or injured would not seek them out time and again. The profession is accepted and recognized under the workmen's compensation laws of all but a handful of States. More than 75 percent of the 800 commercial health insurance companies provide coverage for chiropractic care in one or more of their policies. The recently enacted program of medical assistance for the aged (Kerr-Mills) has been adopted in several States, 23 of which provide benefits for doctors' services. Of these 23, at least 12 include the services of doctors of chiropractic.

Under the Federal employees health benefits plan of 1959, of the 12 employees' organizations offering plans, 7 include the services of doctors of chiropractic. This in itself is persuasive evidence of a demand for such care by Federal employees. The statements filed and testimony presented by representatives of Federal employee organizations are further evidence of this demand. It becomes quickly apparent that an employee of a private employer suffering an injury compensable under State law has an advantage over a Federal employee suffering a similar injury under Federal law, since the former could select chiropractic care if he chose to do so, whereas the Federal employee would do so at his own expense.

This brings us to the real harm and inequity which the proposed amendment would correct. As we understand the program and its practical administration, a Federal employee injured on the job is ordinarily entitled to select a qualified physician to render the necessary care. If the injury is a strain, sprain, or similar type of injury, the employee may—indeed, often does—select a doctor of chiropractic to attend the injury. Since such doctors are licensed and qualified to treat injuries of that nature, it seems unjust to deny the employee the benefits which would have been available to him had he selected a doctor of medicine or osteopathy. As frequently happens, the injured employee received the chiropractic care to his total satisfaction from a doctor of his choosing and is then burdened personally with the resulting expense. Usually an employee has enjoyed such success with similar care in the past that he chooses chiropractic care with full knowledge that he does so at his own expense.

Upon submitting this claim to the Bureau of Employees Compensation, he is advised by form letter that he must pay the bill himself since the Federal law makes no provision for chiropractic care. This letter has a dual effect: It is unfair not only to the employee, but also to the doctor. For this doctor, licensed and qualified to render the care involved, finds himself maligned—although unintentionally, we are sure—by an agency of the Federal Government. When our department is called upon by one of our members to explain this inequitable treatment, we must always advise that under present policy of the Bureau the only solution is amendment to the Federal law. That, gentlemen, is our purpose in supporting the amendments to the present law and in making ourselves available to you for questions you may have regarding any pertinent aspects of the chiropractic profession.

In summary, it is our position that the Federal employees should enjoy the same rights and privileges in compensation matters as are enjoyed by persons in private employment. We believe that the licensing powers of the several States provide an adequate assurance that those rendering care to these injured persons are possessed of the necessary qualifications. The inequity under present Federal law creates an economic barrier to the proper exercise of that traditional State prerogative.

Mr. BUNKER. Our major concern as a health profession, the chiropractic profession, is with the structure and function of the human body, and I think it is important for this committee and for the Congress to understand the role of the chiropractic practitioner and his interest in this kind of health legislation.

Primarily, of course, this is a bill to provide relief to the Federal employees who are now denied the services of doctors of chiropractic under the Federal Employees' Compensation Act. The role of the doctor of chiropractic is concerned with structure and function. I think it would be pertinent for us to look briefly at the kinds of injuries with which we are concerned, under this compensation law.

In statistics prepared by the Statistics Division of the Employees' Compensation Commission, we find a table categorizing the injuries for the year 1959, and we find 12 categories of injuries. I will recite

them quickly. They are amputation, bruises, contusions and abrasions, burns and scalds, concussion, cuts and lacerations, dislocations, fracture, puncture, strains and sprains, dermatitis, tuberculosis, and miscellaneous.

Now I think the significant thing that we ought to look at here—because this profession is concerned with structure in the human body, and abnormality in structure and function—the thing we ought to look at is the “strain and sprain” category of injuries, which it is to be noted constituted nearly 50 percent of all compensable claims filed in that period studied.

During this time, there were some 42,600 compensable claims filed; 19,100 were strains and sprains.

The chiropractic profession is concerned further, and more specifically, with the relationship between the structure of the spinal column and the function of the nervous system, and therefore, we ought to look at the back, and under the category of “strains and sprains” we find a substantial number of injuries involved. The upper back and the lower back, with a total of some 7,000 injuries involving that area of the anatomy.

So we see that we are not concerned here with infectious process, we are not concerned here with the acute disability resulting from illness, we are not concerned here with programs of immunization or immunology—those programs are a part of the broad picture of public health which are the concern of public health practitioners generally, but are not particularly pertinent to an area such as we are now discussing.

The question here has to do with traumatic injuries, and a traumatic injury which so frequently results in an abnormal structural situation in the body, and when that kind of abnormality can be corrected and has been successfully corrected by doctors of chiropractic, it would seem the fundamental right of the free choice of physicians for the employee to select a doctor of chiropractic to attend to that special sort of injury. That is a sort of specialty of the chiropractic profession.

I might say further that under the workmen's compensation laws of all States, all but a handful—there are three that do not provide for chiropractic coverage under workmen's compensation. Under all but those handful of States, chiropractic services are provided to persons suffering compensable injuries in private employment, and it would seem that the Federal Government ought not to be in a position of discriminating against its employees and providing a lesser range of benefits to Federal employees than are available to those in private employment.

Now this question of freedom of choice is one about which there has been some confusion. Somewhat reluctantly—because I do not want to inject extraneous issues—but I think one of the most vigorous spokesmen for the free choice principle is the American Medical Association, and I would like to read the text of the AMA's position on the question of free choice, first of all, as it was recited at a delegates' meeting of its house of delegates in 1959, and I quote:

Lest there be any misinterpretation, we state unequivocally that the American Medical Association firmly subscribes to freedom of choice of physician and free competition among physicians as being prerequisites to optimal care. The benefits of any system which provides medical care must be judged on the degree to which it allows of or abridges such freedom of choice and such competition.

The statement that I just read was made to clarify and strengthen the position of the AMA which is stated in June 1959.

In that one, and I quote:

The American Medical Association believes that free choice of physician is the right of every individual, and one which he should be free to exercise as he chooses. Each individual should be accorded the privilege to select and change his physician at will, or to select his preferred system of medical care, and the American Medical Association vigorously supports the right of the individual to choose between these alternatives.

I think that attitude is quite significant, and one which I hope the committee will keep in mind during the course of this legislative proposal, which may find itself attacked by certain representatives of organized medicine, and I think the representatives of that group or any other group should be required to maintain some consistency in the expressions which they put forth.

We, too, as a health profession, believe in the right of the individual to choose his own doctor. We feel that the States have set up the qualifications of those who are practicing an art of healing, those who hold themselves out as skilled and competent to care for sick and injured persons. We believe that the traditional role of the States has not come to a sorry state, which requires any intervention or any substitute for that rule. We believe the States have adequately exercised their police power to control the practice of the health professions and to determine and prescribe the qualifications of those practitioners.

They have done so in 46 of the 50 States, and I might add in the District of Columbia, and further in Puerto Rico, and in the Canadian Provinces. We think that is quite significant. We see no need to disturb that traditional role.

We urge this amendment, for the additional reason—and perhaps somewhat selfishly, and I might say somewhat selfishly on my part, because in our law department we are frequently bothered with a question that comes from our members when they say:

I took care of a Federal employee. He came to me for a back injury. He was entitled to compensation under the Federal law. I treated him. I submitted my bill. It was refused, and the Federal employee received a letter from an agency of the Federal Government indicating to him that the Federal Government would not permit by sanction this man to have my services as he could have the services of others.

We believe that that question can only be resolved legislatively, as Mr. Creer suggested in his statement. We believe that this is the time and place for that correction to occur.

I think the demand for this kind of coverage by Federal employees is quite clear. The recognition of the profession is consistently increasing. Seventy-five percent of the commercial health insurers provide chiropractic care in one or more of their policies. The workmen's compensation departments of all but three States include chiropractic care for practitioners who are licensed to practice, and more significant, I think, is the fact that under the Federal employees' health benefits plan of 1959, of the 12 employee organization plans, 7, a majority, include chiropractic care.

There is another interesting note—and again I do not like to refer to what might develop to be an extraneous issue—but under the medical assistance for the aged program, Kerr-Mills, 23 States have provided doctors' services in adopting that plan. Of the 23, 12, again

a majority, include the services of doctors of chiropractic. That is consistent with the congressional intent expressed so well by Senator Humphrey and Senator Kerr on the floor of the Senate and in conference.

We believe those are fundamental things which require less expression than they have had. We believe they are consistent with the modern tradition and with the traditions of the representative roles of the Federal and State Governments in these health matters. I think the committee very much for hearing us, and we are prepared to answer any questions that the committee might have.

Senator BURDICK. Thank you for the fine statement.

Now, getting back to my question, which you have partially answered.

Mr. BUNKER. Yes, sir.

Senator BURDICK. There are those that contend that there is authority now for an injured Federal employee to use chiropractic. What, in your experience, has been the result where an employee has used chiropractic?

Mr. BUNKER. I have had experience only with cases in which the employee receiving chiropractic care has been declined the payment of the bills resulting when that care was chiropractic.

Now, I know of no case in which the Commission has designated or authorized or otherwise construed the term "physician" or other language of the present law in such a way that services of doctors of chiropractic could be allowed. I know of none in my own experience.

Does that answer the Senator's question?

Senator BURDICK. How long have you been connected with the association?

Mr. BUNKER. I have been with the National Chiropractic Association since the middle of 1959, sir, and I represented a State chiropractic organization before that. My experience was the same there.

Senator BURDICK. Then as a matter of practice, chiropractors are not included or the claims are not paid?

Mr. BUNKER. That is correct, and it seems to me to be 100 percent true in all cases.

Senator BURDICK. In other words, a Federal employee, if he wants to get this type of service, must pay for it out of his own pocket?

Mr. BUNKER. That is true, sir.

Senator BURDICK. Now, a part of your thesis is that since the respective States police and regulate these professions, that there is no reason why the Federal Government should not also?

Mr. BUNKER. We do not believe that it is the role of the Federal Government. We do not believe that the Federal Government desires in any way or through any of its agencies to insert itself, to interpose itself between the individual person who wants remedial care and the practitioner and his qualifications and the State's role in determining what those qualifications must be. We see no evidence whatever in any expression from the Federal Government of its desire to involve itself in such an intervention.

Senator BURDICK. I wonder if you would state for the record the three States whose compensation laws do not allow the payment of chiropractic services?

Mr. BUNKER. As I recall, sir, they are West Virginia, Wisconsin, and Maine.

There is legislation ending in the State of—pardon me. I should correct that. There is a legislative program by the chiropractic people in that State pending, by which they hope to have the law amended. In the State of West Virginia, the number of practitioners is quite small, but nonetheless, the efforts of the small group there are consistent with the desire of the profession and the tradition which we keep referring to, that employees everywhere should be entitled to the services of qualified practitioners.

In the State of Wisconsin, the situation there is one with which I am not familiar. I know there have been efforts to amend the law, but they have been unsuccessful because of side issues which have cropped up and shunted the attention of the legislature from the attempted amendment to other matters.

Senator BURDICK. You said early in your testimony that chiropractic profession is permitted in all but 4 of the 50 States.

Mr. BUNKER. Yes, sir.

Senator BURDICK. Now, when you referred to the three States that did not allow compensation claims, you also include there the four other States, do you not?

Mr. BUNKER. Senator, I do not, for the reason that to my surprise, quite frankly, I have found that the State of New York through its compensation department has paid in isolated cases in my experience—the extent to which they make these payments I cannot substantiate by any authority—but I have seen the papers authorizing and directing payment to doctors in that State who are not licensed to practice in that State.

The State of Mississippi carries out a program which is quite similar. The profession in those States, oddly enough, is not, as we say, prohibited from practicing chiropractic in the sense that the practice is illegal in the eyes of the State authorities. It is a very fine point, but—and, of course, I do not mean to suggest that we of the national organization are not strongly in favor of licensing regulation; we believe regulation of the profession is essential—but nonetheless, the profession in those unlicensed States has enjoyed cooperation with the workmen's compensation departments, and bills for services rendered by them have been paid, even though they are not regulated or licensed.

As for Louisiana and Massachusetts, I have no knowledge that the situation there is similar.

Senator BURDICK. Would you describe for me the insurance arrangements which are available to chiropractors with respect to liability in malpractice cases? Could you develop for us the nature of the insurers who handle this type of insurance, their rates as well as their experience?

Mr. BUNKER. Well, sir, I am only generally familiar with the availability of that coverage from commercial insurance companies. I might say that there are some 50 or 55 insurance companies or agents through whom a malpractice liability coverage can be obtained, and I might say further that in 1946 the members of our organization formed a bona fide insurance company under the State laws of Iowa, and they issue a malpractice liability policy to members of the organization.

Interestingly enough, a policy purchased by a doctor of chiropractic from an insurance company for malpractice purposes carries the same rate as does that purchased by a general practitioner of medicine. The surgeon, of course, involves a higher risk, and therefore, the premiums are usually treble the basic premiums for limited coverage. The policies issued by commercial companies for chiropractors and doctors of medicine or osteopathy in general practice run about \$106 to \$108 or \$110.

That same coverage which is available through the profession's mutual insurance company can be purchased for \$40, and that \$40 premium rate has been in force from the time the company was formed until the present day. The experience at the company, from my own personal knowledge and familiarity with its practices and its experience, has been excellent. It has enjoyed perhaps one of the lowest loss ratios of any casualty company, and particularly in the malpractice field, and I might say that coverage available to practitioners of the healing arts generally cannot be purchased in minimum limits of coverage, in many States, for less than \$225 to \$250, and that is true for all practitioners.

The surgeon, of course, is involved in a higher degree of risk, and I think that is a characteristic of the profession. It is rather self-limiting in the extent to which it is likely to produce harm, because it deals with structure and function. It is not likely to remove the wrong arm or the wrong leg, or the wrong eye, or the wrong ear, as has been the experience of companies dealing with other professions who are engaged in more hazardous proceeding. I think that might be the reason for the differences in this kind of coverage.

Our claims have been quite modest in size, I would say.

Senator BURDICK. Well, thank you very much. I think you have covered my questions very adequately.

Mr. BUNKER. Thank you, Mr. Chairman.

Senator BURDICK. Our next witness is Mr. Dewey Anderson.

STATEMENT OF DEWEY ANDERSON, WASHINGTON, D.C.

Mr. ANDERSON. Mr. Chairman, I have a prepared statement that I wish to talk from and to, if I may.

Senator BURDICK. Your full statement will be included in the record, without objection.

(The prepared statement of Mr. Anderson follows:)

PREPARED STATEMENT OF DEWEY ANDERSON

Personal: I come before you as a private citizen with considerable interest and some knowledge of the subject being examined. My training has been in the biological and social sciences at Leland Stanford University, where I took the A.B., M.A., and Ph. D. degrees.

As a member of the California Legislature in 1937, I was chairman of a committee comparable to this one, and then introduced the first inclusive prepayment health plan ever seriously entertained by a California Legislature. There followed interim hearings and published reports of which I was one of the authors. This proposal was the progenitor of the pioneer Warren health plan offered by then Governor, and now Chief Justice of the Supreme Court, Earl Warren. I cite this to indicate some 25 years of continuing interest in the subject of how to provide best for the people's health.

As the executive director of the Public Affairs Institute since its founding in 1947, I have initiated, supervised, and edited, or written a number of research studies bearing directly on this subject, including:

"Pensions in Our Economy," a study of old-age pension problems and proposals in relation to the general economy (Stephen Raushenbush), 1955.

"How To Get Safe Drugs and Cut Their Cost" (David Cushman Coyle), 1960.

"Health Insurance for the Aged," (F. J. Seidner), 1960.

"Health Service Is a Basic Right of All the People" (Dewey Anderson).

The last-mentioned study appeared in 1956, was written by me as a result of closely pacing President Truman's Commission on the Health Needs of the Nation. As it presents brief sketches of all the health professions and occupations, including chiropractic, I submit copies for the use of the committee.

Study of the characteristics of occupations, including in some measure the training, licensure, practice, barriers to entrance and status of the healing professions, were part of the research and published books on occupations which my codirector, Prof. P. E. Davidson, and I released at Stanford University as products of the Institute for Occupational Research. So, in more than a cursory way, I have been identified with aspects of this subject for the past quarter of a century.

With specific reference to my acquaintance with manipulative therapy as exemplified in the practice of osteopathy and chiropractic, I cite the following. My brother holds an unlimited license to practice as a physician and surgeon in California. He graduated from the Los Angeles College of Osteopathic Physicians and Surgeons, which in the amalgamation now going on between the medical doctors and osteopaths has become the California College of Medicine. For more than a quarter of a century I have had the benefit of many discussions and experienced the diagnoses and treatments of a well-trained and skilled practitioner of manipulative therapy.

Then, when I had written the "Health Service" study, Dr. Emmett J. Murphy challenged me to make an examination of his profession, and the result was a brief pamphlet study, "The Present-Day Doctor of Chiropractic." There followed a request of the National Chiropractic Association to be a consultant member along with Dr. Gregg Evans, longtime dean of sciences at Yankton College in South Dakota and a member of the State board of examiners, in making a 1961 survey of the seven accredited colleges of the National Chiropractic Association.

With this background in the field under review, I proceed to certain specific questions raised by the proposed legislation.

1. *What does the legislation do?*—It permits a person in Federal employ to seek the advice and treatment of a licensed doctor of chiropractic for which compensation will be paid from compensation funds on the same identical showing and basis as would the services of a doctor of medicine or osteopathy.

2. *What the legislation does not do.*—It does not license or place its stamp of approval on any form of practice, on any kind of treatment, to the exclusion of any other legally recognized by a State as within the scope of practice as defined by the State law operative in the patient's resident State.

3. *What is the opposition to this legislation?*—The opposition is identical both as to substance and source as it was some years ago when the law was amended to include the services of persons licensed as osteopathic physicians. It is the same kind and source of opposition offered over the years to every other school of healing by the dominant school of medicine through its organized professional and political arm, the American Medical Association.

Just as in each previous instance, that opposition has cited the conviction of the AMA that the form of healing attacked at the moment was a "cult," was without adequate scientific evidence and support of its theories and practice. So in this instance the medical fraternity and its medically trained and disciplined members in the Government apparatus seek to prevent the inclusion of licensed chiropractic physicians and their manipulative therapy in this law. If they run true to form, they will do so by parading again the body of outdated, unsubstantiated, and biased material which they would have you believe represents truly scientific evidence of the harmful or even dangerous character of chiropractic treatment.

They have set themselves up in this respect as the sole defenders of the health and safety of the unsuspecting and unknowing public which they would have you believe are the easy prey of these untrained and even dangerous cultists. In doing so they have lost sight of the Bible's admonition about casting the first stone for they tend to forget the presence in their midst of M.D.'s who are qualified under this legislation to receive compensation for practice but for whose com-

petency the AMA cannot vouch. Nor can their conformity be attested either, for the history of this century of medicine in this country is one of much diversity of belief and practice, of sharp differences between the exponents of one "school" or another, of fights to the finish between allopaths, homeopaths, and eclectics.

4. *AMA opposition to both osteopaths and chiropractors persists.*—Now comes the struggle of the AMA against the two schools of natural and manipulative therapy, osteopathy and chiropractic, which Hyde and Wolff in their brilliant and heavily documented Yale Law Journal study of the American Medical Association indicate may be tinged with "an element of self-protection from this economic encroachment."

With respect to osteopathy, which the AMA still officially regards as a "cult," the process of elimination by absorption is well underway. It started in California, where if the people vote to rescind their osteopathic licensure law next November the "unification agreement" as it is called, between a group of California osteopaths and the California Medical Association will become effective. By its terms and the attendant features of the program, osteopaths holding degrees from the former Los Angeles College will pay some \$65 in fees and find themselves renamed "M.D." instead of "D.O." Where the long continued and often vigorous if not vicious denunciation of osteopathy by leaders in the AMA went to in the process is not known.

But osteopathy as an exponent of the efficacy of manipulative therapy remains the basic tenet of the practice of these osteopathic trained physicians no matter if their new M.D. title is bought and paid for and a new lettering has to be engraved to erase the old D.O. on their shingle. Yet the practice performed is in major degree akin to and closely approximates that of its first cousin, chiropractic. For both forms of healing center their attention on the musculo-skeletal system and believe its functions have a large bearing on the health or ill health of the patient.

The attitude of the medical organization toward chiropractic continues antagonistic, in part at least because of an image in the minds of its medical doctors carried over from a past of poorly trained, "quickie college" or diploma mill chiropractors advertising and hawking their cures in an unprofessional manner so offensive to the sensibilities of the serious medical profession. I submit that if there were grounds for such an image they are not now characteristic of the profession.

It is well to recall that in 1910 when Abraham Flexner made his famous Carnegie survey of medical schools, over half of some 150 schools were found to be privately owned, operated for profit, possessed little in the way of curriculum, few trained instructors, gave short courses and a goodly number were outright "diploma mills." It took 10 years to close them out, reducing their number by the early 1920's to less than a hundred, and now down to eighty. But there is little room for complacency on the part of the AMA, despite noticeable improvement, for its own educational survey made during the past 10 years showed that of a selected sample of 41 medical schools only half were doing what the surveyors termed "a fair job," only three measured up to their full potential, and the rest were not offering a "satisfactory education" in training medical doctors. Of over 28,000 members of faculty teaching in U.S. medical schools, only 9 percent were on full time, while 75 percent were on a purely voluntary status. (Educational Number, J.A.M.A., September 1954. Later partial studies reach similar conclusions.)

I am convinced from the recent inspection made of all National Chiropractic Association's seven colleges that the image which the AMA has or seeks to create in the public mind is not correct. For training and practice have come a long way in the 60 years of chiropractic's existence, and progress has been rapid in the past decade.

Here is a seriously motivated profession, conscious of its responsibilities, and aware of its limitations. It knows, too, that despite all the harassment it has undergone, it is the second largest of the healing arts, and treats a significant number of patients. It devotes over 4,000 hours to lecture, laboratory and clinical training in its 4-year course of study, half of it in the basic sciences the other half in applied subjects.

Chiropractors are licensed by State law to practice in 46 States and the District of Columbia. The continuing improvement and enlarging status and acceptance of chiropractic is testified to by the trends in education and licensure. One State has a severely restricted definition of chiropractic, while another has a very broad one. But even in its most restricted form State license covers the types of injuries and illnesses which make up the bulk of compensation cases.

Now, all but five jurisdictions permit the doctor of chiropractic to practice under workmen's compensation laws. Some 600 life and accident insurance companies accept chiropractors' certification of claims, professional athletic organizations and many industrial concerns have chiropractors on their staffs or make their services available to their people. Labor unions particularly favor this form of care. The Brotherhood of Railroad Trainmen is a conspicuous example, for its members are subject to many back and other injuries and strains for which chiropractic treatment has been found beneficial.

A strong evidence of the seriousness of purpose of this profession is the continuing professional program of its National Chiropractic Association. This organization has its House of Delegates, its accrediting body and educational council governing the policies and inspection of the programs of the colleges, holds regional professional seminars, and State and national conventions. It issues a monthly journal, the content and tone of which are soundly ethical and scientific. It has a national research committee engaged in controlled research work. By all the attributes and in all the ways we have of testing the worth of a profession, today's chiropractor is seeking to meet the public standard.

5. What is the public interest? I am here testifying on these bills as a citizen concerned about the public welfare. I am not an advocate of any particular form of healing. I am convinced from experience that today's chiropractor is equipped by training in the sciences underlying health, and in forms of therapeutics which have beneficial results so that he is able to meet people's needs.

It is my belief that the responsibility rests with the several States to require strict compliance with basic science and professional licensure laws, operating under professionally competent and impartial boards, and to insist on conduct of a high ethical character of all who practice any form of healing. That it is not the Federal Government's responsibility to attempt to lay down such strictures, nor to exclude any profession which is so treated by any sovereign State in the enactment of laws providing for compensation for attending any Federal employee.

Therefore, in the public interest, and in keeping with the just division of powers and responsibilities between the two branches of government, Federal and State, I urge your favorable report and congressional passage of this amendment.

Mr. ANDERSON. The first section of this little statement deals with my personal qualifications to discuss the topic, the bills under consideration before this committee. I come before you as a private citizen, and in that capacity, I am a witness. I have some knowledge and a very considerable interest in the subject being examined. My training has been in biological and social sciences, and I graduated with the three degrees through the graduate degree at the University of Stanford in California.

Now as a member of the California Legislature and chairman of a committee comparable to this committee in the Senate, in 1937 I was the chairman of a group of the legislature that introduced the first inclusive prepayment health plan in California. There followed interim hearings in support of that legislation across the State, and reports were written by us.

This is a long time ago. The proposal was pioneer proposal. It was shortly followed by the one which the then Governor of the State of California, Earl Warren, now the Chief Justice of the Supreme Court, introduced, and I cite this to indicate a long-time interest over a span of more than a quarter of a century in the problems of people's health and since being the executive director of the Public Affairs Institute, I have either initiated, written, or supervised the research that has resulted in publication of a whole series of reports, some of which I mention in this statement, bearing upon the health of the Nation.

One of those reports, which I have submitted to the committee, is "Health Service Is a Basic Right of All the People." It was published in 1956. It was written as a result of having closely paced President Truman's Commission on the Health Needs of the Nation. It pre-

sents brief sketches of all the health professions and occupations, including chiropractic.

This study, over a period of more than a year, when the manuscript was ready, was submitted by registered mail to all the official bodies governing the various professions in the health field, and time was allowed for correction or statement, and an indication was made that anything that looked wrong would be corrected, and that counter-statements would be included in the record. None came of a serious nature, and the publication followed.

I have also had an opportunity over a long period of time to study as an experiment the field of occupations, among which have been these various health and healing arts; but with special reference to the field of inquiry this morning, my own relationship with a manipulative therapy, both osteopathy and chiropractic, has come about as a result of a family connection, and further study. My own brother holds an unlimited license as a physician and surgeon practicing osteopathy in the State of California. He graduated from the Los Angeles College of Osteopathic Physicians & Surgeons, which now in the amalgamation process going on between medical doctors and osteopaths has just been changed to become the California Medical College, a class A medical school, without one change being made in faculty or content, being moved over from the osteopathic column now into the medical column of training.

For more than a quarter of a century, I have had the experience with my brother of both manipulative care and treatment on both my person and my family, and I have had the benefit of numerous discussions with a man who is able and intelligent in his field.

Then when this health study that I referred to a moment ago was published, I was challenged by Dr. Emmett Murphy to make a more thorough inquiry into the field of chiropractic, and the result was a brief study which we published, "The Present Day Doctor of Chiropractic." In preparing that study, I was given the opportunity by the National Chiropractic Association to visit its schools, to visit its practitioners in various places, to submit myself to treatments and diagnoses, and to familiarize myself at firsthand with the practice of chiropractic.

Then last year, the National Chiropractic Association decided, as part of its accrediting procedure of its colleges, to have an independent survey made of those colleges. Now, I was asked, along with Dr. Gregg Evans, the longtime dean of sciences at Yankton College in South Dakota, a member and presently the secretary of the State examining board, himself a well-known chemist, to participate in this firsthand inspection of the seven schools accredited under the National Chiropractic Association.

Now, with this background, I have had probably more opportunity, however well I may have availed myself of it, to know as a layman about this profession and what it can do, and its limitations, than most anybody you can mention, and I asked myself as one who has been long acquainted with the process of Government in the Senate and House of the U.S. Congress what I would do if I were sitting where you are sitting in determining the answer to this proposed legislation.

What does the legislation do?

Well, it permits a person in Federal employ to seek the advice and treatment of a licensed doctor of chiropractic, for which compensation will be paid from compensation funds on the same identical showing and the same basis as would the services of a doctor of medicine or a doctor of osteopathy.

And what the legislation does not do: It does not license or place a stamp of approval on any form of practice, on any kind of treatment, to the exclusion of any other locally recognized by a State as within the scope of practice as defined by the State law operative in the patient's resident State.

Why, then, opposition to this legislation? Well, the opposition is identical, both as to substance and source, as it was some years ago, when the law was amended to include the services of persons licensed as osteopathic physicians.

It is the same kind and source of opposition offered over the years to every other school of healing by the dominant school of medicine through its organized professional and political arm, the American Medical Association.

Just as in each previous instance, that opposition has cited the conviction of the AMA that the form of healing attacked at the moment was a "cult," was without scientific evidence in support of its theories and practice. So in this instance, the medical fraternity and its medically trained and disciplined members in the Government apparatus seek to prevent the inclusion of licensed chiropractic physicians and their manipulative therapy in this law. If they do so, they will succeed again in parading the body of outdated, unsubstantiated for the most part, and sometimes biased material which they would have you believe represents truly scientific evidence of the harmful or even dangerous character of chiropractic treatment, for they have set themselves up in this respect as the sole defenders of the health and safety of the unsuspecting and unknowing public which they would have you believe are the easy prey of these untrained and even dangerous cultists.

In doing so, they have lost sight of the Bible's admonition about casting the first stone, for they tend to forget the presence in their midst of M.D.'s who are qualified under this legislation to receive compensation for practice, but for whose competency the AMA cannot vouch. Nor can their conformity be attested either, for the history of this century of medicine in this country is one of much diversity of belief and practice, of sharp differences between exponents of one "school" or the other, of fights to the finish between allopaths, homeopaths, and eclectics.

The AMA opposition to both osteopaths and chiropractors persists, because now comes the struggle of the AMA against two schools of natural and manipulative therapy, osteopathy and chiropractic, which Hyde and Wolff in their brilliant Yale Law Journal study indicate "may be tinged"—and I quote—"with an element of self-protection from this economic encroachment."

With respect to osteopathy, which the AMA still officially regards as a "cult," the process of elimination by absorption is well underway. It started in California, where if the people vote to rescind their osteopathic licensure law next November, the "unification agreement," as it is called, between a group of California osteopaths and the California Medical Association will become effective. By its terms

and the attendant features of the program, osteopaths holding degrees from the former Los Angeles college will pay some \$65 in fees and find themselves renamed "M.D." instead of "D.O." Where the long-continued and often vigorous, if not vicious, denunciation of osteopathy by leaders in the AMA went to in the process is not known.

But osteopathy as an exponent of the efficacy of manipulative therapy remains the basic tenet of the practice of these osteopathic-trained physicians no matter if their new M.D. title is bought and paid for and a new lettering has to be engraved to erase the old D.O. on their shingle. Yet the practice performed is in major degree akin to and closely approximates that of its first cousin, chiropractic. For both forms of healing center their attention on the musculoskeletal system and believe its functions have a large bearing on the health or ill health of the patient.

The attitude of the medical organization toward chiropractic continues antagonistic, in part at least because of an image in the minds of its medical doctors carried over from a past of poorly trained, "quickie college" or diploma mill chiropractors advertising and hawk-ing their cures in an unprofessional manner so offensive to the sensibilities of the serious medical profession. I submit that if there were grounds for such an image they are not now characteristic of the profession.

It is well to recall that in 1910 when Abraham Flexner made his famous Carnegie survey of medical schools, over half of some 150 schools were found to be privately owned, operated for profit, possessed little in the way of curriculum, few trained instructors, gave short courses, and a goodly number were outright "diploma mills." It took 10 years more, into the 1920's, to close them out, reducing their number by the early 1920's to less than 100, and now down to 80, but there is little room for complacency even today on the part of the AMA. Despite this notable improvement, by its own editorial survey, surveys made during the past 10 years show that of a selected sample of 41 medical schools, only half—and there I am quoting the surveyers themselves—only half were doing what the surveyers termed a "fair job." Only 3 measured up to their full potential, and the rest were not offering "a satisfactory education" in training medical doctors.

And of over 28,000 so-called members of faculty—these are people who are associated with training centers, as doctors on lists in hospitals, and so forth—in U.S. medical schools, only 9 percent were in full time, while 75 percent were on a purely voluntary basis, and I give you the citation.

I am convinced from the recent inspection made of all National Chiropractic Association's seven colleges, that the image which the AMA has or seeks to create in the public mind is not correct. For training and practice have come a long way in the 60 years of chiropractic experience, and progress has been rapid, most particularly in the past decade. I believe this to be a seriously motivated profession, conscious of its responsibilities and aware of its limitations.

It knows, too, that despite all the harassment it has undergone, it is the second largest of the healing arts. It treats a significant number of patients. It devotes over 4,000 hours to lecture, laboratory, and clinical training in its 4-year course of study, half of it in the basic sciences, the other half in applied subjects.

Chiropractors are licensed by State law to practice in 46 States and the District of Columbia. The continuing improvement and enlarging status and acceptance of chiropractic is testified to by the trends in education and licensure. One State has a severely restricted definition of chiropractic, while another may have a broad one, but even in its most restricted form, State licenses cover the types of injuries and illnesses which make up the bulk of compensation cases.

Now all but five jurisdictions—and I am corrected by Mr. Bunker's later statement; my published information is some years old—permit the doctor of chiropractic to practice under workmen's compensation laws. Some 600 life and accident insurance companies accept chiropractors' certification of claims. Professional athletic organizations and many industrial concerns have chiropractors on their staffs, or make their services available to their people. Labor unions particularly favor this form of care. The Brotherhood of Railroad Trainmen, whom I know at firsthand, is a conspicuous example, for its members are subject to many back or other injuries and strains for which chiropractic treatment has been found beneficial.

A strong evidence of the seriousness of purpose of this profession is the continuing professional program of its own National Chiropractic Association. This organization has its house of delegates, its accrediting body and educational council governing the policies and inspection of the programs of the colleges. It holds regional professional seminars, State and National conventions. It issues a monthly journal, the contents and tone of which are soundly ethical and scientific. It has a national research committee engaged in controlled research work, and by all the attributes and in all the ways we have of testing the worth of a profession, today's chiropractor is seeking to meet the public standard.

Now what is the public interest?

Well, I am here testifying on these bills as a citizen concerned about the public welfare, and solely in that capacity. I am not an advocate of any particular form of healing. I am convinced from experience that today's chiropractor is equipped by training in the sciences underlying health and in the forms of therapeutics which have beneficial results, so that he is able to meet people's needs. It is my belief that the responsibility rests with the several States to require strict compliance with basic science and professional licensure laws, operating under professionally competent and impartial boards, and to insist on conduct of a high ethical character of all who practice any form of healing. That it is not the Federal Government's responsibility to attempt to lay down such strictures, nor to exclude any profession which is so treated by any sovereign State in the enactment of laws providing for compensation for attending any Federal employee.

Therefore, in the public interest, and in keeping with a just division of powers and responsibilities between States and the Federal Government, I urge a favorable report on the two bills under consideration. Senator BURDICK. Thank you, Mr. Anderson. That is a very comprehensive statement.

Senator JAVITS, do you have any questions?

Senator JAVITS. No. Thank you very much, Mr. Chairman.

Senator BURDICK. I guess there are no questions.

Mr. ANDERSON. Thank you.

Senator BURDICK. Joseph Thomas, of the United Federation of Postal Clerks.

STATEMENT OF JOSEPH F. THOMAS, DIRECTOR OF ORGANIZATION, THE UNITED FEDERATION OF POSTAL CLERKS

Mr. THOMAS. Mr. Chairman, members of the subcommittee, for the record and for purposes of identification, I am Joseph F. Thomas, director of organization of the United Federation of Postal Clerks. I am presenting this testimony for John F. O'Connor, legislative director of the United Federation of Postal Clerks, who is unable to be present this morning due to hearings before the House Post Office and Civil Service Committee on salary legislation for postal and Federal employees.

The name of our organization is rather new, having been changed last year through the mergers of several old line postal employee organizations, the National Federation of Post Office Clerks, the United National Association of Post Office Craftsmen, the National Postal Transport Association, and several locals of the United Postal Workers. Prior to the merger, I was president of the United National Association of Post Office Craftsmen. We have offices at 817 14th Street NW., Washington, D.C., and we represent 145,000 post office clerks.

As an organization we are in complete support of S. 1322 and S. 1055, introduced by Senators Burdick, of North Dakota, and Magnuson, of Washington, respectively. These bills, if enacted, will provide an opportunity, under the Federal compensation law, for postal and Federal employees whenever injured on duty to use the services of all practitioners of the healing arts and not be limited in any way as at present.

Both bills are amendments to the present law to provide that employees may receive the services of chiropractors. We have long been in favor of this amendment to the Compensation Act. As far back as 1945, Legislative Representative William I. Horner, one of the predecessors of Mr. O'Connor, testified in behalf of S. 178, introduced by the former Senator Abe Murdock, of Utah, and which proposed this same amendment to the Compensation Act.

It is not our intention to attempt to go into the technical details in any way concerning the healing arts, as we feel that we are not competent to do so. We have some opinions concerning the possibilities and limitations of each of the healing arts. Many of us, or members of our families, have been treated for various illnesses by doctors of medicine, osteopathic doctors, and doctors of chiropractic. As individuals, we have had the right and privilege to select the doctor which we thought would do the most good. We have found in the instances where we, or members of our families, have selected the chiropractic treatment because we thought it was needed that it proved very helpful. We think the same right should be extended to employees of the Federal Government under the Compensation Act.

Doctors of chiropractic can be extremely helpful to employees of the Federal Government for certain injuries, thereby reducing to a great degree the period of disability of the employee and lessening the amounts necessary to be paid for compensation.

The road of the chiropractic healing art has not been an easy one since its inception some 60-odd years ago. Yet the fact that it has thrived and has proven itself of service to the public is indicated by the fact that today there are many more schools of chiropractic than a few years ago; and there are far more men and women practicing the art than a few years ago. Today, there are some 46 States, as well as the territory of Puerto Rico and the District of Columbia that license chiropractors. The profession has continued to undergo changes and improvements, and has made great progress over the years through research and in raising its standard of treatment and practice.

A further indication of its progress in recognition is that many States presently permit doctors of chiropractic to practice under their workers' compensation law. The Veterans' Administration has fully recognized chiropractic education under the GI bill and many hundreds of insurance companies allow doctors of chiropractic to make examinations for insurance.

We believe, quite definitely, that a chiropractic doctor can be helpful to Federal employees when injured, and we further believe that in this enlightened day and age they should be recognized under the Federal employees' compensation law. The chiropractic healing art can no longer be considered as visionary or impractical. It is a well-established healing profession and today chiropractic doctors have millions of patients indicating a general acceptance of this manner of healing by citizens of our country.

Mr. Chairman and members of the subcommittee, the membership of our organization desire the opportunity to have a free selection under the Compensation Act of any doctor they feel can be of help to them. The enactment of this legislation does not make such selection mandatory. It merely means that if the individual concerned, in his opinion, believes that he can secure better results he may under the law, use the services of a chiropractor.

We trust the subcommittee will report favorably on this legislation. We also wish to thank you for the opportunity of appearing before the committee and expressing our viewpoint.

Senator BURDICK. Thank you, Mr. Thomas.

Senator JAVITS?

Senator JAVITS. No questions.

Senator BURDICK. I have a question, Mr. Thomas.

Mr. THOMAS. Certainly. I am sorry.

Senator BURDICK. Does your Postal Union have health plans?

Mr. THOMAS. Yes, sir, we do.

Senator BURDICK. Do they include chiropractic care?

Mr. THOMAS. No, we do not include chiropractic care, and I may say that we have many protests from our members because of that fact. I cannot tell you exactly the reason that we do not recognize chiropractors, but I believe it has something to do with the fact that they are not recognized under the compensation law which we are discussing here today.

Senator BURDICK. If this amendment were made, would that make any difference?

Mr. THOMAS. I certainly believe we would comply with the amendment. I surely do.

I may say that I made a trip in behalf of our health plan, back in October, and I received many, many protests from members because of the fact that we did not pay chiropractic claims.

Senator JAVITS. If the Senator would yield, what would you have to do in order to make it effective under your plan?

Mr. THOMAS. Well, I simply think that would be a matter for our organization to decide, and I believe if the provisions of the law allowed, chiropractic treatment was provided for in these bills, our executive board, our hospital plans directors, would pass a motion and comply with this ruling.

Senator JAVITS. Well now, why does that affect your plan? How do the two tie together? Why do you have to wait for this law in order to do something you recommend that we do?

Mr. THOMAS. Truthfully, we do not have to wait. I believe that we could pay these claims, and I cannot explain to you why we have not, except that as I say, I think we have tried to go along with the accepted practices of the Compensation Act, and we have simply recognized those that have been recognized by the compensation board.

Senator JAVITS. Well then, how has your organization decided that you should give this testimony? Is this your testimony, or does the organization take this stand?

Mr. THOMAS. Well, I will tell you how we have decided, Senator. We have had a number of claims—I am going to try to explain this to you the best way I know how—we have had a number of claims where I think the employee has thought that he has been covered for chiropractic treatment. I think that when he submits the claim to us, and he finds out that he is not covered, he is very distressed about the matter, and we have had sufficient of those claims to make us realize that we should be covering the chiropractic treatments, and it is my impression that at the next meeting of our entire convention, we will make the change.

Senator JAVITS. Well, how is this position that you are expressing here today taken? What official action did your organization take enabling you to say that they are for this bill?

Mr. THOMAS. We have not passed on this officially at a convention. I say that it has been brought about by our experience with our members. We feel as though certainly we can do no harm in endorsing the legislation, and we feel that we will be helpful to certain of our members who prefer chiropractic treatment.

Senator JAVITS. Thank you, Mr. Chairman.

Senator BURDICK. In your statement, you state as far back as 1945, Legislative Representative William Horner, one of the predecessors of Mr. O'Connor, testified on behalf of S. 178.

Do you know in what capacity Mr. Horner testified at that date?

Mr. THOMAS. I cannot tell you why Mr. Horner testified in behalf of that legislation at that time. I assume that it had something to do with a convention action.

I might mention, sir, that before the merger of the three organizations, the National Postal Transport Association, the old UNIPOC, which was the United National Association of Post Office Craftsmen, and the National Federation of Post Office Clerks, the other two organizations, did have hospital plans, and we did pay chiropractic claims.

Senator BURDICK. Now when you are talking about "official action," you are talking about official action of this new amalgamation?

Mr. THOMAS. That is right.

Senator BURDICK. Any questions?

That is all. Thank you.

Mr. THOMAS. Thank you.

Senator BURDICK. Mr. Tommy Martin, president of the National Rural Letter Carriers' Association.

I understand, Mr. Martin, that you want to get over to the other side of the Capitol.

STATEMENT OF TOMMY M. MARTIN, PRESIDENT, NATIONAL RURAL LETTER CARRIERS' ASSOCIATION, ACCOMPANIED BY JOHN W. EMEIGH, SECRETARY, NATIONAL RURAL LETTER CARRIERS' ASSOCIATION

Mr. MARTIN. Mr. Chairman and members of the subcommittee, my name is Tommy M. Martin. I am president of the National Rural Letter Carriers' Association, an organization composed of 39,500 regular, substitute, and retired rural letter carriers. I am accompanied by Mr. John W. Emeigh, secretary of our association, who also serves as health insurance director of the rural carrier benefit plan, the health insurance plan sponsored by this association under the Federal Employees' Health Benefits Act of 1959.

We would first like to express our appreciation to Senator Warren G. Magnuson of Washington, and to you, Senator Burdick, for the introduction of bills to amend the Federal Employees' Compensation Act so as to provide for payment of chiropractic services. We are also grateful for the opportunity to appear before your committee and testify on this proposed legislation.

It is important to first note that a definite problem does exist. Employees who sustain work-connected injuries or disabilities may not presently elect treatment by chiropractic physicians if they desire to receive payment of, or reimbursement for, required care and treatment under the Compensation Act.

The nature of a rural letter carrier's work involves a type of movement and constant stretching which does give rise to work-connected disabilities peculiarly subject to care and treatment of chiropractic. The fact that such treatment cannot be paid by the U.S. Government under the Compensation Act causes these employees to personally pay for care which, in our opinion, should be a responsibility of the United States.

The committee, of course, is aware of the fact that numerous health insurance plans presently provide such benefits to the insureds by making provision for payment to chiropractors. This coverage is granted in the rural carrier benefit plan of health insurance for non-work-connected injuries or disabilities. No payment, however, can be made under our insurance plan for any claim submitted for medical care costs or treatments in connection with on-the-job injuries or disabilities in those cases which are determined to be compensable under the Compensation Act. In compensable cases, therefore, the employee is denied benefits under both his health insurance and workmen's compensation.

Our experience in making payments for chiropractic services would indicate that this is unfair to the employee. We maintain a constant

review of claims in connection with administration of our health plan in order to assure proper payment under our program, and also actuarially to project our experience for the future in line with past and current experience.

A check on claims submitted and paid does not produce any evidence that services in this chiropractic area of the benefit structure are generally overused or abused. Admittedly, in this area, just as in other areas of the benefit structure of any health plan, there is an occasional case which is considered either an abuse of the coverage by the insured individual, the doctor, the facility and/or overutilization of the benefits. We do not believe that the rare incidence of these claims is of sufficient gravity upon which any case can be built to continue to deny chiropractic coverage under workmen's compensation. We feel certain that adequate controls under the regulations of the Bureau of Compensation can be adapted to this type of healing care and treatment, just as they are presently used in "policing" all services currently paid for under the act.

Mr. Chairman, this association endorses the legislation presently before you. We urge that this committee approve a bill to provide for the payment of chiropractic services under the Federal Employees' Compensation Act.

Thank you very much, Mr. Chairman.

Senator BURDICK. Thank you for this very fine statement.

Could you tell me in a general sort of way how frequently, how much your members make use of chiropractic service?

Mr. MARTIN. Perhaps Mr. Emeigh, who is the director of our health benefits plan, could answer that more adequately than I could.

STATEMENT OF JOHN W. EMEIGH, SECRETARY, NATIONAL RURAL LETTER CARRIERS' ASSOCIATION

Mr. EMEIGH. Senator Burdick, we do not have any specific data that I can give you to show a percentage of incidence among our total claims paid, but in the capacity of review officer of the claims, I do not believe that they constitute any large percentage of the doctors' calls which would come under the medical expense provisions of our plan. The major reason for this being brought to our attention is the large number of denials which do need to go out from our claims office, due to the fact that claims are submitted in connection with these compensation cases. As President Martin pointed out in his testimony, we do have a rather irksome problem here, because inasmuch as it has been deemed to be a compensable case under compensation, the man cannot get paid for the chiropractic services or treatments under the Compensation Act, and inasmuch as our plan under the Federal health benefits program excludes any benefits in compensation cases, then our plan also cannot make payment for chiropractic services; although under our health plan we do normally provide this service.

We do not have any pattern of abuse. We believe it is a good service, and yet the man finds that if he had just normally gone to the chiropractor, he could have gotten payment, but due to the fact he had to go in connection with a work injury, he is denied payment both under compensation and under his health plan. We think that

is an unfortunate situation, and your bill would, of course, correct that.

Senator BURDICK. Well, if the legislation is corrected, do you think that will lead to a broadening of the health plan?

Mr. EMEIGH. Well, it may, sir. It may lead to a broadening of some of the health plans as was pointed out by the previous organization witness. We, of course, have paid chiropractic benefits for years, and we do provide it presently.

Senator BURDICK. In the present health plan?

Mr. EMEIGH. Yes, sir; we do. The definition of a doctor in our plan, which is the rural carrier benefit plan, presently insuring almost 20,000 rural letter carriers in this country, reads as follows: "A doctor is a licensed physician, surgeon, osteopath, chiropractor, or a dentist, for purposes of services covered by the plan."

Senator BURDICK. Thank you very much.

Dr. Grady V. Lake.

STATEMENT OF GRADY V. LAKE, CHAIRMAN, LEGISLATIVE COMMITTEE, INTERNATIONAL CHIROPRACTORS ASSOCIATION

Dr. LAKE. Chairman Burdick, I am Grady V. Lake. I am a doctor of chiropractic, and I practice in Atlanta, Ga.

My appearance before the subcommittee is as a member of the Board of Control of the International Chiropractors Association and Chairman of the Legislative Committee; and accompanying me today are Mr. James D. Harrison, on my right, the general counsel for our association, Davenport, Iowa, and our Washington, D.C., counsel of ICA, Brig. Gen. Joseph P. Adams.

International Chiropractors Association, with headquarters in Davenport, Iowa, is an organization composed of doctors throughout the United States and foreign countries. It is dedicated to the public welfare and to the promotion and preservation of high professional standards. It maintains that all peoples of the world are legally entitled to freedom of choice of doctor for their personal health care; and that ICA's standards of membership are intended to assist all peoples, groups and agencies to obtain responsible health service. In keeping with our declared policy of freedom of choice of doctor, it is our request that the present Federal Employees' Compensation Act be amended so as to permit injured employees entitled to receive medical services under such act to utilize the services of chiropractors.

To point up the situation as it now exists under the Federal Employees' Compensation Act, I would like to read to the committee a letter written by Harold T. Hickey, Chief of the Audit and Compensation Payroll Branch, U.S. Department of Labor, Bureau of Employees' Compensation, 10th Compensation District, under the date of January 17, 1962. This letter was written to Mr. Bernard W. Schenken, 1395 10th Street, Marion, Iowa; File No. A10-45156. The letter reads, in its entirety, as follows:

DEAR MR. SCHENKEN: We have received a bill in the amount of \$12 which has been submitted on account of charges for services rendered by Dr. R. A. Hender, chiropractor, for treatment of the injury you sustained on October 4, 1961.

The Federal Employees' Compensation Act provides that employees injured in the performance of duty shall be furnished services, appliances and supplies that are prescribed or recommended by duly qualified physicians which in the opinion

of the Bureau are likely to cure or to give relief or to reduce the degree or the period of disability or to aid in lessening the amount of monthly compensation. The act defines the term "physician" to include surgeons and osteopathic practitioners within the scope of their practice as defined by State law. Aside from surgeons and osteopathic practitioners the term "physician" does not include any practitioners in other fields of healing practice.

In view of this, there is no basis on which to approve payment for the services of Dr. Hender because his services were not prescribed or recommended by a duly qualified physician within the meaning of the act. We are accordingly enclosing the bill, which you must now consider your personal obligation. Dr. Hender has been informed of this action by way of a copy of this letter.

Very truly yours,

HAROLD T. HICKEY,
Chief, Audit and Compensation Payroll Branch.

Senator Burdick. I think that would answer a previous question you had concerning this.

Senator BURDICK. Yes, it does.

Dr. LAKE. To emphasize the importance of the problem, it should be understood that chiropractic has developed and become the second largest healing profession in this country. We point to the fact that some 25,000 chiropractors are now serving 35 million American people. Our ICA files disclose that more than 500 insurance companies make payments to chiropractors for chiropractic services or reimburse policyholders for the payment of such services.

The science of chiropractic deals with the relationships between the articulations of the vertebral column and the nervous system, and the role of these relationships in the restoration and maintenance of health.

The practice of chiropractic consists of analysis of any interference with normal nerve transmission and expression, and the correction thereof by an adjustment with the hands of the vertebral column for the restoration and maintenance of health, without the use of drugs or surgery. The term "analysis" is construed to include the use of X-ray.

Chiropractic is recognized not only by National, State or provincial governments but also by independent insurance companies, unions, industry and the public. As an illustration, the constitution of the Brotherhood of Locomotive Firemen and Enginemen insists that chiropractic care be provided for in its contracts with management. Again, the Painters, Decorators and Paperhangers, AFL-CIO, have several plans with chiropractic provisions.

Forty-six States, Puerto Rico, the District of Columbia, the Canal Zone, most provinces in Canada, and many other nations have enacted meaningful licensing laws.

Private insurance companies regularly pay chiropractic claims.

Some industries now have staff doctors of chiropractic and many industries routinely refer injured employees. Management-labor contracts provide for chiropractic care. Workmen's compensation laws in most States provide for chiropractic care.

The public is utilizing services of doctors of chiropractic in an ever-increasing volume.

Many national employee organizations now provide members chiropractic care under the health insurance program for Federal workers recently enacted by Congress. Many States provide chiropractic care to the aged under provisions of the Kerr-Mills bill recently enacted by Congress.

The degree to which the chiropractic profession has been successful in establishing itself as a recognized healing art has been the subject of several recent articles published in national magazines and newspapers.

On October 16, 1961, the conservative Wall Street Journal published a comprehensive article headlined, "Chiropractors Make Headway in the Struggle To Win Complete Acceptance." I offer to this subcommittee and respectfully request that a copy of this article be made a part of this hearing.

Senator BURDICK. Without objection, it is so ordered.

(The article referred to above will be found in the appendix on p. 36.)

Dr. LAKE. Thank you, sir.

McCall's magazine recently published a story by reporter Samuel Grafton entitled "The Case for Chiropractors." In its issue of October 1959, McCall's stated:

Certainly chiropractic has been attacked by organized medicine for almost two-thirds of a century since, with passion and high anger. The results of the long fight hardly represent a clear-cut victory for medicine. There are 30,000 chiropractors in the country now, and while the art is not licensed in New York (and three other States), it is licensed in 46, including Alaska and Hawaii.

While medical associations do not recognize chiropractic and continue to work against its growth, cooperation between doctors of medicine and doctors of chiropractic at the community level appears to be increasing. Certainly instances of this type of cooperation are no longer considered unusual within the chiropractic profession.

An illustration of the kind of attitude which is fostering greater cooperation was reported in the Wall Street Journal article which commented that Dr. Charles Bechtol, chief of orthopedics at the University of California at the Los Angeles Medical Center, said:

Chiropractic has a place in the healing arts * * *. Established professions tend to look down their noses too much at professions which may not be so well established and therefore the older professions miss what good there can be in the newer ones.

Samuel Grafton in his article in McCall's reports:

A certain number of M.D.'s have been impressed by chiropractic enough to make use of some of its methods and to offer their patients spinal manipulation. Medical opposition in this country is so strong that this type of acceptance has spread more rapidly abroad. A group of 200 West German M.D.'s, including members of the medical school faculties, has formed an organization for research and work in chiropractic; one of its leaders, Prof. Dr. L. Zukschwerdt, professor of surgery at the University of Hamburg, has praised chiropractic in the German medical press, recommending that physicians not neglect the application of so worth-while a method.

Doctors of chiropractic are highly trained men and women. The typical chiropractor has had a thorough and intense training in all subjects needed to practice his profession and to deal with the vital life-or-death problem of health service to the public. He is not learned in the administration of medicines or the performance of surgery, because he prescribes no medications and does no surgery. In fundamental subjects, however, such as anatomy, physiology, bacteriology, neurology, his training is equal to or superior to that of other practitioners of the healing arts. In addition to these, he alone is intensively trained in those subjects peculiar to chiropractic which deal with misalignments of the spinal column that pinch nerves.

TABLE 1.—Comparison between a typical medical school and a typical chiropractic school

Subject	Johns Hopkins class	Palmer College class	Subject	Johns Hopkins class	Palmer College class
	<i>Hours</i>	<i>Hours</i>		<i>Hours</i>	<i>Hours</i>
Anatomy.....	508	520	Pediatrics.....	72	-----
Physiology.....	256	520	Surgery.....	352	-----
Pathology.....	401	195	Therapeutics.....	16	-----
Chemistry.....	200	325	Clinic.....	-----	585
Bacteriology.....	114	130	Hygiene.....	-----	65
Diagnosis.....	224	520	Chiropractic technic.....	-----	553
Neurology.....	112	130	Chiropractic philosophy.....	-----	195
X-ray.....	48	292	Public speaking.....	-----	65
Psychiatry.....	144	65	Principles and practice.....	-----	195
Obstetrics.....	198	65	Ethics and jurisprudence.....	-----	65
Pharmacology.....	80	-----			
Medicine.....	656	-----	Total hours.....	3,397	4,485

After earning a degree from an accredited college of chiropractic, the candidate normally must pass a comprehensive examination before a State or provincial licensing board before going into actual practice.

As in all professions, the educational process of the chiropractic profession is a continuing one. Seminars, symposiums, and similar type professional meetings are held frequently to discuss new techniques and developments.

There are thousands of doctors of chiropractic serving in every State of the Union, Canada, and in other parts of the world. It is estimated that some 35 million Americans have been to a doctor of chiropractic one or more times. In the United States, the geographic distribution of doctors of chiropractic indicate that chiropractic care is within easy reach of the residents of practically every community.

Chiropractic is also practiced in Canada, Mexico, Denmark, Switzerland, England, Belgium, Germany, Sweden, Australia, New Zealand, South Africa and other foreign nations.

Since the discovery of chiropractic in 1895, this profession has been constantly growing in size and stature and service to the American people. Within its confines of the spine and its relationship to the nervous system chiropractic has built a most enviable record.

We hope that you members of the subcommittee, as national thought leaders will be responsive to the need of the Federal employees and favorably report this bill so they may utilize the services of chiropractors.

Senator BURDICK. I want to thank you for your excellent statement.

Could you tell me whether or not the armed services use chiropractic in any way in the treatment of injury?

Dr. LAKE. No, they do not. That is definite. I know from personal experience in being here in Washington. My brother is a doctor of chiropractic, and he had to serve in the Army, and we came to talk to our Senator Russell concerning it, and actually it was at the time a shock in the Joint Armed Services Committee, because—well, the Navy could use chiropractic, but there have been bills proposed that were never passed.

Senator BURDICK. You say the Navy uses chiropractic?

Dr. LAKE. No, none of the armed services today.

Senator BURDICK. None of the services.

Do you, Mr. Adams, wish to add to this?

Mr. ADAMS. Well, Chairman Burdick, I have only one point in view of the questions you raised earlier with other witnesses about the necessity for the legislation. I would like to call to your and the staff's attention an official transcript in docket No. 57-251 in the matter of Herbert H. Lester, Employees' Compensation Appeals Board, Department of Labor. This was a matter where I represented Mr. Lester in the matter of a claim for \$6 before the Compensation Appeals Board. Mr. Lester was a Department of Agriculture, Soil Conservation Service employee, who was injured in the line of duty, and he ended up with this unpaid claim for \$6 for chiropractic services. We tried this case before the Compensation Appeals Board, and I have given the correct description of it, and on page 26 of the transcript, Chairman Schwartz of the Appeals Board addressed himself to me in my argument, and said, "You don't think that this type of thing should be corrected, as you put it, by legislation?"

And, Chairman Burdick, as the record will indicate, on several occasions during the 1 hour and 40 minutes of my argument, I was interrupted first by one and then another of the three members of this Compensation Appeals Board, who indicated to me on several occasions that there was nothing they could do about it, the legislation would have to be enacted before chiropractic could be included under the Employees Compensation Act and I offer that as substantiation of a matter that I am sure you consider quite significant.

Thank you very much.

Senator BURDICK. Thank you very much. Thank you all, gentlemen.

At this time, I would like to read into the record this telegram and letters I have received.

I would like the record to show that the subcommittee received a telegram from Jerome J. Keating, vice president of the National Association of Letter Carriers:

Unfortunately the hearing before your committee on authorizing use of chiropractors under Compensation Act is being held the exact time I must appear before House Post Office and Civil Service Committee on salary legislation. I will not be able to be present but I want to advise you that National Association of Letter Carriers at numerous conventions has gone on record in favor of authorizing services of chiropractic doctors in compensation cases. Chiropractic doctors serve very useful function in maintaining health of American people. Their services are recognized by other departments of Government; they have been approved by many insurance companies and many of the health benefits policies now being operated under Civil Service Commission supervision, recognize and compensate services of chiropractic doctors. We are heartily in favor of this legislation and hope the committee will render favorable report.

Senator BURDICK. Another letter from Stanley J. Ziolkoski, Z-i-o-l-k-o-s-k-i, directed to Senator Morse:

Regarding S. 1322, introduced by Senator Burdick, which I understand is in Labor and Public Welfare Committee, of which you are a member. This bill would permit public employees to go to chiropractic physicians. This is a good bill, and we would appreciate your favorable consideration of it.

STANLEY J. ZIOLKOSKI,

Education Board, Brotherhood of Locomotive Firemen and Enginemen, State of Oregon.

Senator BURDICK. Also a letter to the Honorable Wayne Morse from Richard F. Robedeau, president of the United Federation of Post Office Clerks:

A sizable minority of our members have obtained relief from the discomfort and disability of strains and back injuries after treatment by a chiropractor. Some have found that chiropractic treatment furnished relief after other methods had failed.

Since many such strains and injuries occur on the job and are covered by the U.S. Employees' Compensation Act, it is our feeling that chiropractic treatment should be covered and be paid by the Government if the employee receives a compensable injury and elects to have it treated by a chiropractor.

Would you kindly give special attention to S. 1322, introduced by Senator Burdick, which would provide for payment by the Government of chiropractic treatment in cases covered by the Compensation Act.

Again thanking you for your past favors, I remain,
Sincerely yours,

RICHARD F. ROBDEAU.



Senator BURDICK. Another letter to the subcommittee:

Thank you so very much for your thoughtfulness (and that of Senator Burdick) in wiring me the date of the hearings on bill S. 1322 and for the opportunity afforded me to appear to offer testimony.

I made a request to our good friend, Senator Burdick, that I have an opportunity to appear in behalf of this bill. There are two reasons why I will not be there: First, I am indisposed and should not make the trip; second, I understand that the National Association of Chiropractors have well qualified witnesses who will make an appearance. I hope this is true.

I thank you so very much for the courtesy you have shown me.
Cordially yours,

FARMERS UNION GRAIN TERMINAL ASSOCIATION,
M. W. THATCHER, *General Manager.*

Senator BURDICK. I have just received a note that I am needed on the farm bill. I do not know how many witnesses are remaining. We have 15 minutes.

Do you wish to add something?

Mr. BUNKER. Mr. Chairman, I have two brief items I would like to put into the record. The seven organizations whose plans include chiropractic care are the following: American Foreign Service Protective Association, Federal Postal & Hospital Association, National Association of Letter Carriers, National Association of Post Office & General Services Maintenance Employees, National Federation of Post Office Motor Vehicle Employees, National League of Postmasters of the United States, National Rural Letter Carriers' Association.

In addition to that, Mr. Chairman, I would offer for whatever interest it might be to the committee, "A Survey and Analysis of the Treatment of Sprain and Strain Injuries in Industrial Cases," compiled in Florida, by an independent research organization, and I will leave that with the committee.

Senator BURDICK. That will be received for our file.

Mr. BUNKER. Thank you, sir.

Senator BURDICK. Mr. Murphy, do you have anything to add?

Mr. MURPHY. No, sir.

Senator BURDICK. I would like the record to show that Senator Murphy had intended to be with us this morning, but his assistant advises me that with transportation difficulties in Boston, he was unable to be here, and we regret that very much.

Now, are there any witnesses here who have prepared statements?

Mr. MILLER. I am Clinton Miller, National Health Federation.

Senator BURDICK. Would you mind submitting yours by statement?

Mr. MILLER. I would be happy to.

Senator BURDICK. Are there any in the room this morning who do not have prepared statements; have any short testimony?

If not, your statement, Mr. Miller, will be received for the record, and we will keep the record open for about a week for additional statements.

(The prepared statement of Mr. Miller follows:)

PREPARED STATEMENT BY CLINTON R. MILLER, REPRESENTING THE NATIONAL HEALTH FEDERATION

Chairman Burdick and members of the subcommittee, I am Clinton R. Miller, assistant to the president of the National Health Federation. The NHF is a nonprofit, health rights corporation with its main offices at 709 Mission Street, San Francisco, Calif. Our Washington office is in room 303, Continental Building, 1012 14th Street NW., Washington, D.C. The NHF is a rapidly growing national organization, composed of thousands of members who firmly believe in freedom of choice in matters of health where the exercise of that freedom does not endanger the health or safety of another and thereby deny him an equal freedom.

The presentation of testimony by the National Health Federation in support of S. 1322 and S. 1055 does not mean that the NHF endorses any healing art over another. Specifically, we do not endorse or support the chiropractic practitioner over any other licensed practitioner or physician.

We believe in licensing as a proper function of State governments, and declare that individuals should have the right to the doctor of their choice as they are licensed by State law and within the scope of their practice as defined by State law.

We believe that it is consistent with these objectives and beliefs to support S. 1322 and S. 1055. We endorse the testimony of the International Chiropractors Association and the National Chiropractic Association, and all previous witnesses for the bill, and support their position on this bill.

We compliment the sponsors of the legislation, the Honorable Quentin N. Burdick, of North Dakota, and the Honorable Warren G. Magnuson, of Washington, for their introduction of their bills. We believe that the bills are fair, and represent a statesmanlike approach which is in harmony with the Constitution and traditions of our great Republic.

It is a matter of common knowledge that chiropractic is the professional choice of millions of Americans for some or all of their health problems. It seems consistent that this choice should not in any way be denied an individual because he is an employee of the United States. The bill is designed to correct this inconsistency.

Thank you.

Senator BURDICK. The subcommittee is adjourned.

(Whereupon, at 11:45 a.m., the subcommittee was adjourned.)

APPENDIX

PREPARED STATEMENT OF JAMES K. LANGAN, OPERATIONS DIRECTOR, GOVERNMENT EMPLOYEES' COUNCIL AFL-CIO

The Government Employees' Council, AFL-CIO, a federation of 23 unions of Government employees comprising a total of 700,000 members, wish to go on record as endorsing the provisions of S.1322 which, in effect, recognize licensed practitioners of chiropractic science in treating eligible Federal employees under the U.S. Employees Compensation Act.

Chiropractic practitioners are now generally recognized as qualified, by the various States, as a branch of the healing arts, alleviating suffering and pain. We feel that to include them as qualified to treat injured Federal employees is both proper and desirable and hope that the Senate committee will favorably recommend the passage of S.1322.

AMERICAN MEDICAL ASSOCIATION,
Chicago, Ill., May 25, 1962.

Senator QUENTIN N. BURDICK,
Chairman, Subcommittee on Employees Compensation, Labor and Public Welfare Committee, U.S. Senate, Washington, D.C.

DEAR SENATOR BURDICK: The following statement is submitted on behalf of the American Medical Association with respect to S. 1322, 87th Congress, which is now before your subcommittee for consideration.

The purpose of this bill, as indicated by its title, is to amend the Federal Employees Compensation Act so as to permit injured employees, entitled to receive medical services under the act, to utilize the services of chiropractors.

The American Medical Association is opposed to this proposed legislation and urges that it not be favorably reported by your subcommittee.

Chiropractic is a pseudoscience which is not based on scientific methods and, therefore, should be recognized as what it is—a theory of cultism. It is premised on the theory that human illness is all related to the spinal column. It holds that the nerves that emanate from the spinal cord become impinged or "pinched" by the vertebrae, thereby causing malfunction and disease. As a result of this theory, chiropractors claim that disease and illness such as allergies, diabetes, heart trouble, and tonsillitis, to name a few, can be cured by adjusting or manipulating the spinal column. Such a theory, of course, runs counter to the established facts of medical science.

Recently the appellate division of the Supreme Court of the State of New York had an occasion to inquire into the nature of chiropractic practice and the qualifications of chiropractors to use X-rays in their "diagnosis" of human illness. This court in *Chiropractic Association of New York, Inc. v. Commissioner of Health*, stated in part: "* * * the technical education, training and skill of chiropractors are, in general, substantially deficient in * * * vital areas of knowledge and judgment * * *."

To our knowledge, none of the schools teaching chiropractic have been accredited by any recognized Federal, State or regional qualified accrediting agency. Nor are any of the so-called degrees awarded by schools of chiropractic recognized by any standard accrediting agency. While these individuals are licensed in many States, their licenses are limited and they are prohibited from prescribing medicines or drugs and practicing surgery.

Chiropractors are not educated or equipped by either background or training to diagnose human illness. This inability to render a diagnosis coupled with their pseudoscientific method of treatment, when taken into consideration in connection with their vociferous stand against life-saving vaccines and wonder drugs, precludes, or perhaps demands, that no consideration be given them.

This proposal would authorize injured Federal employees to receive services from individuals with little or no qualifications, little or no knowledge of the medical science, and little or no scientific background. Such a situation would

be viewed by the medical profession as a regression from the high point of medical progress which has been made by a sure and steady pace utilizing scientific methods.

We earnestly believe that the enactment of S. 1322, 87th Congress, is not in the public interest, nor in the interest of those Federal employees who might mistakenly seek the service of a cult practitioner rather than the sound scientific advice of qualified physicians.

We thank you for giving us the opportunity to express the views of the physicians of America concerning this important legislation. We respectfully request that this statement by the American Medical Association be included in the record of the hearings on S. 1322, 87th Congress.

Sincerely yours,

F. J. L. BLASINGAME, M.D.

[From the Wall Street Journal of Oct. 16, 1961]

CHIROPRACTORS CLIMB—THEY MAKE HEADWAY IN STRUGGLE TO WIN COMPLETE ACCEPTANCE—MORE HEALTH INSURERS COVER THEIR FEES; EDUCATIONAL STANDARDS MAY BE RAISED—BUT MANY M.D.'S ARE SKEPTICAL

(By Thomas W. Bush)

LOS ANGELES.—Chiropractors, those manipulators of the backbone long scorned by the medical profession, are registering some small but important victories in their long struggle to gain full recognition as legitimate and deserving practitioners of the healing arts.

Within the last year or so, chiropractors have been cheered by these developments:

For the first time in history, a Federal public health measure—the medical assistance for the aged bill that Congress passed in the closing days of the Eisenhower administration—makes provision for reimbursement to chiropractors.

In the 11-State Midwestern Teamsters Conference, the giant union has begun paying from its health and welfare fund the claims of members who have been treated by chiropractors. Similar action has been taken by the union in Washington State. Payments are made through insurance carriers with whom the union has contracted.

All told, more than 500 health insurance companies now recognize chiropractic, up from 200 only 7 years ago. The number continues to mount steadily.

And here in California, D.C.'s, or doctors of chiropractic, now sit along with regular M.D.'s and dentists on the State Board of Public Health, which recommends legislation in the health field.

But the Nation's 25,000 chiropractors are not stopping with those gains. To strengthen their forces, they are merging a multitude of State and local associations which formerly fought furiously among themselves over seemingly minor differences in philosophical approaches to their profession. Mergers of associations recently have been completed in California, Kansas, Connecticut, and Texas, and "unity meetings" are now being held by two associations in Michigan.

ADDITION OF STATE AFFILIATES

The National Association of Chiropractors, with 6,200 members, now has seven State associations as closely bound affiliates. Dr. L. M. Rogers, national president, predicts this number will increase significantly.

Washington lobbyists representing the National Association of Chiropractors and the 5,400-member International Chiropractic Association are currently working together in legislative consultation. Formerly representing bitterly opposed viewpoints within the profession, these national organizations are moving closer together with the ultimate aim, leaders of both groups say, of a single, tightly disciplined association.

The education of chiropractors—the subject of much derision by M.D.'s—may be in for upgrading. At a series of meetings this year, directors of the two big chiropractic organizations have been considering a 200-page report put together by Research & Education Corp., a San Francisco firm providing management consulting services for schools. The report urges, among other things, that chiropractic school accreditation procedures be standardized and that some small chiropractic colleges be turned into prep schools. The two associations have agreed on the fundamentals of the proposals and directors will meet in Chicago again in November for further discussion.

Almost all States now require 4 years of high school before admission to a chiropractic college, and some require 2 years of college. In a majority of States, 4 years of chiropractic college is necessary for the D.C. degree. After chiropractic school, D.C.'s usually must pass a State examination and then may go directly into practice. Since chiropractors don't practice in hospitals, there is no internship.

EFFORT TO STANDARDIZE LAWS

There is some talk, too, of attempting to standardize the State law governing chiropractic. Most States have laws spelling out the limits of a chiropractor's practice, but four States—New York, Massachusetts, Alabama, and Louisiana—do not. Any model law would probably be based on California's, considered the most liberal of any. More than 5,000 chiropractors are licensed in this State.

Despite its recent victories, chiropractic still faces an uphill battle to win acceptance from the American Medical Association, spokesman for 183,000 medical doctors. The Journal of the AMA recently said of chiropractic: "The training that students receive is miserable as to faculty, curriculum, and methods." The Journal also stated that "* * * this cult is not a worthwhile thing for the health and welfare of the people and recognition of it certainly is not in their best interests."

Many doctors contend chiropractic is unscientific. Chiropractic is based on the theory that disease is caused by abnormal function of the nervous system. Chiropractors hold that manipulation of the structures of the body, especially those of the spinal column, can help restore normal functions. Chiropractors believe misaligned vertebrae can pinch or frazzle the nerves routed through the backbone to connect the brain and various parts of the body. Such spinal maladjustments, they contend, can lead to many ailments, ranging from ulcers to hip trouble.

Chiropractic was introduced in 1895 by D. D. Palmer, a heavily bearded Davenport, Iowa, man who had made his living peddling fish, lecturing on phrenology (the study of the conformation of the skull), and practicing what he called magnetic healing, a method of slapping and massaging the patient's body. Mr. Palmer was credited with manipulating the spine of a deaf janitor who regained his hearing and went forth as the first chiropractic cure. Medical doctors, skeptical of the Palmer story, note that the nerves of hearing do not enter the spinal cord. But it is true that many nerves do and chiropractors usually attempt to explain the Palmer case by claiming nerves sympathetic with those of hearing were involved.

Up to a point, the diagnosis of a chiropractor and a medical doctor might agree. Consider the ulcer, for example. Both chiropractors and M.D.'s agree ulcers are caused by too much hydrochloric acid in the stomach. But while an M.D. might attribute this condition to too much emotional stress, the chiropractor often claims the extra flow of the corrosive juice results from vertebrae getting out of whack and pinching a nerve. Dr. L. E. Montenegro, a well-known Los Angeles chiropractor, prescribes this treatment: Adjust the offending vertebrae so the acid flow is reduced, then put the patient on a diet of bland foods to give the affected area in the stomach a chance to heal.

A common way for a chiropractor to adjust the spinal cord: He places his hands on the patient's back in a crossed position so that the little fingers of each hand are opposite one another. He then exerts pressure with the heels of his hands.

The Committee to Combat Cults, a unit of the Medical Society of the State of New York, is skeptical of such therapeutic procedures. Says a committee pamphlet: "What the chiropractors learn in school is to correct subluxation (partial dislocation) of the spine—by twisting, bending, kneading, massaging, pinching, squeezing, extending, contracting, distorting, stretching, condensing, restricting, expanding and dilating." The pamphlet adds sarcastically: "With all such maneuvers it is not surprising that a chiropractor does come into court charged with giving his patient a broken neck." Such a case is on record.

A more charitable position on chiropractic is taken by Dr. Charles Bechtol, chief of orthopedics at the University of California at Los Angeles Medical Center. Orthopedics deals with the correction or prevention of deformities, especially in children.

LESSON FROM A "BONESETTER"

"I teach manipulations I learned from a professor who in turn learned them from what are called 'bonesetters' in England." Dr. Bechtol asserts. "Chiropractic has a place in the healing arts. The only quarrel we medical men have is that many chiropractors think theirs is the only art."

Dr. Bechtol believes "established professions tend to look down their noses too much at professions which may not be so well established and therefore the older professions miss what good there can be in the newer ones." However this may be, it is true that osteopathic medicine, which existed for years on the fringes of the medical profession, is gradually working its way toward full acceptance.

Osteopaths believe that many ailments have their roots in maladjustments and misplacements in the bone and muscle system. In many cases manipulative treatment not unlike chiropractic is substituted for healing with drugs and surgery.

Here in California, the State osteopathic and medical associations have merged and all osteopathic schools in the State are scheduled to become regular medical schools in the near future. Also, the Golden State's 63 osteopathic hospitals will become conventional medical hospitals.

Chiropractors normally don't prescribe drugs and in many States the law forbids it. Chiropractors say that when they believe their patients require medical treatment they refer them to M.D.'s.

But medical doctors complain there are many cases on record in which chiropractors have insisted on working on a patient's spine when actually the patient urgently needed other treatment. In Oregon recently, a chiropractor lost a malpractice suit because he failed to detect a case of diabetes which later was cleared up when an M.D. started the patient on insulin shots. But Dr. Bechtol notes that cases of mistaken diagnosis aren't unknown to the medical profession, either.

CONFUSION IN REGULATIONS

Some of the confusion about what a chiropractor may and may not legally do can be traced back to the law itself. For instance, California law says chiropractors can practice whatever they are taught in school. And the State's law setting forth the curriculum of chiropractic colleges requires the study of minor surgery. Some chiropractors contend that thus in California the law gives them the right to perform minor surgery.

But the chiropractors who make this claim—they are identified with the so-called progressive segment of the profession and appear to be a distinct minority—recently lost a round in court when they attempted to get a ruling in their behalf. A superior court judge ruled chiropractors cannot perform minor surgery and must, in fact, remain strictly within the field of chiropractic; that is, they must limit themselves to manipulation of the bones and spinal cord. This decision is being appealed.

Other conflicts over laws have developed. In Louisiana, a chiropractor is attempting to get the State to write a law which would take chiropractic out from under control by the State's medical board. In New York and other States where there are no laws governing chiropractic, the chiropractors contend their practice is extra legal. They liken their situation to the early days of the automobile, when these vehicles weren't against the law but were not specifically allowed or licensed by law.

DAVENPORT, IOWA, *May 23, 1962.*

HON. QUENTIN BURDICK,
*New Senate Office Building,
Washington, D.C.*

DEAR SENATOR BURDICK: As chairman of the subcommittee of the Senate Labor and Welfare Committee, I urge you to endorse passage of S. 1322 and S. 1055 to eliminate injustice to the chiropractic profession through exclusion from present Workmen's Compensation Act. In the interest of chiropractic patients, the endorsement by you and your committee would be most appreciated.

DAVID D. PALMER, B.S., D. Cm, Ph. C,
President, Palmer College of Chiropractic.

VALLEY CITY, N. DAK., *May 23, 1962.*

Senator QUENTIN BURDICK,
Washington, D.C.

DEAR SENATOR: Our profession urges continued support of S. 1033. Good luck in your hearing tomorrow. Many thanks for your past efforts on our behalf.

Sincerely,

ROY A. OTTINGER, D.C.,
President, North Dakota Chiropractic Association.

FARGO, N. DAK., *May 24, 1962.*

Hon. QUENTIN N. BURDICK,
Washington, D.C.:

We want to commend you for your fine efforts in behalf of the chiropractors and Federal employees in your bill, S. 1322.

We as a group extend our gratitude for your effort in getting this bill, S. 1322 considered by the Senate Labor Committee.

We as individual chiropractors will faithfully join in the effort to get our Senators to support S. 1322 when it comes to the floor of the U.S. Senate for a vote.

Respectfully,

FARGO-MOREHEAD CHIROPRACTORS.

THE WESTERN STATES COLLEGE,
SCHOOL OF CHIROPRACTIC,
Portland, Oreg., May 21, 1962.

Hon. WAYNE MORSE,
*Senate Office Building,
Washington, D.C.*

DEAR SENATOR MORSE: It has been called to my attention that on Thursday, May 24, hearings on the Burdick bill will begin. Inasmuch as you are a member of the committee that will hold hearings on this bill, may I take this opportunity to express my personal opinion that this bill merits your favorable consideration.

If memory serves me right, this bill was originally endorsed by Senator Abe Murdock, Democrat of Utah, and at that time the bill passed both the Senate committee and the Senate without opposition. It seems to me that it is only fair that a Government employee who has a compensable injury should be given the freedom on choice to select either a medical or a chiropractic physician for treatment.

Appreciative of your continued interest in this matter, I remain,

Very truly yours,

WESTERN STATES COLLEGE,
R. E. ELLIOT, D.C., *Director.*

NEBRASKA CHIROPRACTIC PHYSICIANS ASSOCIATION, INC.,
Falls City, Nebr., June 5, 1962.

Senator PAT McNAMARA,
Washington, D.C.

DEAR SIR: With the hearing before the Subcommittee on Labor and Public Welfare regarding the Burdick bill (S. 1322) concluded on May 24, may we urge you to support this bill with all the vigor at your command.

The chiropractic physicians of Nebraska urge the passage of this bill and will greatly appreciate your support of it—the Burdick bill, S. 1322.

Respectfully,

Dr. L. H. BURDICK.

GROUP HEALTH CLINIC,
Seattle, Wash., June 11, 1962.

Senator WARREN G. MAGNUSON,
Senate Office Building,
Washington, D.C.

DEAR SENATOR MAGNUSON: The following statement is submitted on behalf of the Professional Services Committee, of the Group Health Association of America, with respect to Senate bill 1055, 87th Congress, on which hearings were recently heard.

The purpose of the bill is to amend the Federal Employees' Compensation Act so as to permit injured employees entitled to receive aid under such act to utilize the services of chiropractors.

The Professional Services Committee of the Group Health Association of America is opposed to this act, and wishes to register its opposition with you.

The theory and practice of chiropractic arose at the turn of the century when there were many diverse searches being undertaken into the nature of disease and illness. Chiropractic, as it became known, presumes that all illness is related to derangements in the relationship of bones and joints, and that manipulation of the proper joint or bone will result in a cure, or at least relief of symptom. In the early years of the century there were many other searches being conducted into the origin and nature of disease. Not only in this country, but wherever civilization has advanced, the increasing knowledge based upon sound study and research has pointed out the limitations and fallacies of many of these schools, and focused attention on the allopathic approach to disease currently supported by the leading medical scientists in this country and abroad. Chiropractic, on the other hand, has remained with its outmoded philosophy and denies the value of bacteriology, endocrinology, surgery, biochemistry, and the host of advances which have contributed so much to the increasing health of the people and their longevity. None of the great medical discoveries of the 20th century has supported any of the philosophic foundations of the chiropractic, but on the contrary have provided understandings of the nature of illnesses and appropriate remedies therefor.

The Professional Services Committee of the Group Health Association of America has been and continues to be interested in improving the quality of medical care available to the citizens of this country. Inasmuch as this bill would permit and encourage Government employees to seek relief from illness or injury from practitioners whose philosophy of medicine rests upon an unproven foundation, whose schooling is far from standardized and subject to no regulation of quality, whose legal right to function is severely limited by the various States, and who do not have ready access to those tools of diagnosis and treatment which have raised the quality of medical care in the United States to its current high level, it is the opinion of the Professional Services Committee of the Group Health Association of America that these bills, if enacted, would be inconsistent with the desire of our association or of the Congress to improve the quality of medical care for Federal employees in this country until it is second to none.

We earnestly believe that the enactment of S. 1055 is not in the public interest and should not be enacted.

Sincerely yours,

W. A. MACCOLL, M.D.,
Chairman, Professional Services Committee, Group Health Association of
America.

