106TH CONGRESS 1ST SESSION

H. CON. RES. 62

Expressing the sense of Congress regarding the guaranteed coverage of chiropractic services under the Medicare+Choice program.

IN THE HOUSE OF REPRESENTATIVES

March 18, 1999

Mrs. Cubin submitted the following concurrent resolution; which was referred to the Committee on Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

CONCURRENT RESOLUTION

Expressing the sense of Congress regarding the guaranteed coverage of chiropractic services under the Medicare+Choice program.

- 1 Resolved by the House of Representatives (the Senate
 2 concurring),
 3 SECTION 1. SENSE OF CONGRESS REGARDING GUARAN4 TEED COVERAGE OF CHIROPRACTIC SERV5 ICES UNDER THE MEDICARE+CHOICE PRO-
- 6 GRAM.
- 7 (a) FINDINGS.—The Congress finds the following:

- (1) In 1972 Congress included chiropractors under the medicare part B definition of physician to provide treatment by means of manual manipulation of the spine to correct a subluxation. This language was crafted to identify a specific chiropractic service using terminology that at the time was unique to chiropractic. No other medical profession used the term manual manipulation of the spine to correct a subluxation. Congress was aware in 1972 that patients required direct access to chiropractic if the benefit was to have any practical meaning.
 - (2) Under traditional fee-for-service medicare, beneficiaries were given direct access to doctors of chiropractic for this benefit. The sole limitation, shared by all medicare providers, is the limitation outlined in section 1862(a)(1) of the Social Security Act, which requires medicare to pay only for those services that are determined to be reasonable and necessary.
 - (3) Treatment by manual manipulation of the spine to correct a subluxation is uniquely chiropractic. Doctors of chiropractic are the only providers educated and trained to perform the treatment of manual manipulation of the spine to correct a subluxation.

- 1 (4) In 1982 Congress established the Medicare
 2 HMO/CMP program directing that all HMO's pro3 vide all part B benefits to medicare beneficiaries. In
 4 promulgating regulations, the Health Care Financ5 ing Administration created a regulatory authority
 6 for HMO's to specify which provider would furnish
 7 medicare benefits.
 - (5) In 1990 Congress directed the Health Care Financing Administration to study the extent to which medicare HMO's make chiropractic services available to medicare beneficiaries. Based on the findings of this study, the Secretary of Health and Human Services was required to make specific legislative and regulatory recommendations necessary to ensure access to chiropractic services. The study and subsequent recommendations have not been forth-coming.
 - (6) Historically, chiropractic patients in medicare have encountered near total exclusion from chiropractic services once they enter into a medicare HMO.
 - (7) The Balanced Budget Act of 1997, which instituted part C of medicare, establishes that each Medicare+Choice plan "shall provide those items

- 1 and services . . . for which benefits are available 2 under parts A and B".
- 3 (8) As a covered service under part B of medi-4 care, chiropractic care which includes treatment by 5 means of manual manipulation of the spine to cor-6 rect a subluxation as performed by a doctor of chiro-7 practic, should be a covered service under part C.
- 8 (b) Sense of Congress.—It is the sense of Congress that—
 - (1) treatment by means of manual manipulation of the spine to correct a subluxation is a uniquely chiropractic service, which Congress recognized in 1972 as a medicare part B benefit;
 - (2) it is the unequivocal intent of Congress to ensure that every Medicare+Choice beneficiary has access to all services covered under the original part B medicare fee-for-service program; and
 - (3) as a covered medicare part B service, treatment by means of manual manipulation of the spine to correct a subluxation provided by a doctor of chiropractic is a guaranteed service for beneficiaries under the new Medicare+Choice program.

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