

DoD Personnel Need Your Help

By James Edwards, DC

The ACA and the Association of Chiropractic Colleges (ACC) are working closely to help advance HR 999, a bill to expand the existing chiropractic benefit for active duty military personnel to cover all TRICARE-eligible beneficiaries. And not surprisingly, the ICA and WCA have offered a bill **that will do much less, and in the process, confuse members of Congress.**

TRICARE is the giant military health care system that provides health care to DoD personnel, including military retirees, dependents, and survivors. HR 999 was introduced in the U.S. House of Representatives in March of this year by Representative Mike Rogers (R-Ala.), at the joint request of the ACA and ACC. Rogers is a member of the House Armed Services Committee, which has jurisdiction over all legislative proposals affecting the TRICARE health care system. Rep. Rogers is a strong chiropractic advocate and received a special "Leadership Award" from the ACA at the 2005 National Chiropractic Legislative Conference (NCLC), for his efforts to expand access to chiropractic care within the military health care system.

The Rogers bill is identical to legislation (HR 3476) introduced in the previous Congress by then-Representative Ed Schrock (R-Va.), with one important exception - the portion of the Rogers bill that defines "chiropractic services" **has been strengthened and improved** over the version originally introduced by Schrock.

As suggested by ACA legal counsel, the language changes proposed in HR 999 were designed to do two major things. First, the new language ensures that **evaluation and management services and therapeutic services will be covered** ... whereas last year's bill (HR 3476) did not. The ACA has learned from experience that federal agencies have a tendency to limit as much as possible, and sometimes even more so, those services covered under chiropractic legislation. The ACA therefore specifically referenced those services.

Second, the ACA wanted to be sure the services authorized would be applied "for the treatment of a patient's health condition, including neuromusculoskeletal conditions and subluxation complex," and **also inserted "as authorized under State law."** Again, the language of last year's bill (HR 3476) presented us with the possibility that chiropractic services would be limited in their application. The ACA therefore proposed language that would permit and assure that doctors will be able to **treat the same patient conditions they are authorized to treat under state law.** To reiterate, the ACA has learned from experience that if a statute can be interpreted by a federal agency to the disadvantage of a chiropractor, it will be. The ACA simply wanted to be as specific as possible.

To build support for the Rogers bill, the ACA is currently distributing over 60,000 "Legislative Alert Bulletins" to members of the chiropractic profession. ACA officials hope to eventually incorporate the Rogers bill, or a provision based on it, into a future version of the Defense Authorization Act, a large legislative package Congress typically enacts into law each year.

Unfortunately, another strong chiropractic supporter serving on the House Armed Services Committee, Representative Jeb Bradley (R-N.H.), reintroduced last year's version as HR 1594. Since the ICA and WCA are supporting this bill, it is highly likely that they were responsible for its introduction. While the Bradley bill is virtually identical to the Rogers bill, **it does not contain the strengthened language that ensures coverage of (1) evaluation and management services, (2) therapeutic services, and (3) the "as authorized under State law" provision.**

I'm pleased there are now at least two members of the House Armed Services Committee - Reps. Rogers and Bradley - who want to expand chiropractic care to include all TRICARE-eligible beneficiaries, and are willing to author their own bills to do so. Both should be commended for their interest and support. However, for the reasons stated above, the Rogers bill represents a technically superior approach - and should we be so fortunate as to see a chiropractic TRICARE provision advance in this Congress, I hope it will include the extra protections that were thoughtfully and with foresight built into the Rogers bill.

Those with solid lobbying experience know there is a great deal of "give and take" involved in the legislative process, and they are prepared to deal in a constructive way with the often torturous process of crafting and advancing legislation. And make no mistake about this situation - the most important thing, in the end, is that the chiropractic profession wind up with a positive provision of law that gets the job done, and helps ensure true access to

chiropractic care in the TRICARE system.

To be candid, I'm shocked that the ICA and WCA would knowingly jeopardize this important goal. How? While both the Rogers and Bradley bills essentially seek the same thing - chiropractic coverage in TRICARE - the ICA and WCA have (and this is truly incredible) stated that **they will oppose the Rogers bill, and have bluntly stated so to Congressman Rogers!**

Talk about undermining a chiropractic champion who took the lead on this issue! Talk about sending the wrong signal to a strong and loyal supporter! And what about the other members of the committee - what kind of mixed signals will they get? Is this dumb or what? **Are the ICA and WCA intentionally trying to limit or preclude the use of E/M codes and therapy services? Are they trying to undercut protections in chiropractic state law?** Are they trying to confuse the members of the committee? I don't know what they are really up to, but in my opinion, this type of action is both foolish and irresponsible ... but certainly not anything we haven't witnessed before.

The ACA and ACC will work closely with Rep. Rogers and other chiropractic supporters in Congress to advance an acceptable TRICARE expansion provision at the earliest available opportunity during the 109th Congress.

If evaluation and management services, physiological therapeutics and "as authorized under State law" language are important to you, then you need to contact your member of the House of Representatives and **urge them to co-sponsor the Rogers Bill, HR 999**, and work for its adoption by Congress.

You can contact your representative very easily on the Internet by going to the ACA Web site (**www.ACAToday.com**); click on "*ACA Seeks Grassroots Action on Chiropractic Military Bill*" and then click on "Take Action Now." Please - do it today!

Author's note: The opinions expressed in this article are solely those of the author and do not necessarily represent the opinions, policies or positions of the American Chiropractic

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