



July 15, 2009

The Honorable Charles B. Rangel  
Chairman, Committee on Ways and Means  
1102 Longworth House Office Building  
Washington, D.C. 20515

Dear Chairman Rangel:

On behalf of the American Chiropractic Association (*ACA*) – and the nearly 65,000 doctors of chiropractic we represent, I wanted to thank you for your continued and progressive leadership in helping to advance the critically important issue of national healthcare reform.

As you know, as primary care, portal-of-entry providers licensed to provide care in all fifty states, America's doctors of chiropractic are well suited to play an essential role in a reformed health delivery system that will in the future, hopefully place a greater emphasis on disease prevention and wellness. Additionally, the chiropractic profession is justifiably proud of the widespread and growing popularity of chiropractic care for treating a range of neuro-musculoskeletal conditions including back pain. As you may know, a recent independent survey (May 2009) of 14,000 individuals conducted by the nation's largest and most well known consumer organization, ranked doctors of chiropractic as the most popular provider with the highest level of patient satisfaction (in comparison to other providers) for the treatment of back pain – a condition estimated to cost our society approximately \$50 billion per year.

I am pleased to enclose suggested legislative **amendments** that we believe should be incorporated into the House Tri-Committee health reform bill, HR 3200. The attached provisions address provider anti-discrimination, point-of-service, consumer protection, and definition issues. We would be pleased to discuss these suggested provisions with you and your staff and to answer any questions you may have regarding them.

Again, thank you for leadership and consideration of our views and concerns.

Sincerely,

A handwritten signature in black ink that reads 'John Falardeau'. The signature is fluid and cursive, with a long, sweeping underline that extends to the right.

John Falardeau  
Vice-President of Government Relations

cc: Members of the House Ways and Means Committee (Majority)

**Critical Provisions are as follows, in Division A, Title I:**

**1. Page 32, after line 21 add:**

After the word “disparities,” insert: and that recommendations reflect all benefits, state authorized health care services, and insurance guarantees available in at least 26 states.

**Justification of Provision:** Provides consumer protections and treatment options that are widely available in a majority of the states by virtue of state insurance equality, and related state laws. This provision would provide that a greater range of existing treatment and provider choices that are widely available under state authority would be given priority during Council deliberations.

**2. Page 51, after line 14 add:**

**(c) NON-DISCRIMINATION AGAINST PROVIDERS IN HEALTH CARE.**

Notwithstanding any other provision of this Act (or an amendment made by this Act), a health insurance issuer to which this Act (or amendment) applies shall not discriminate with respect to participation, reimbursement, covered services or indemnification under a health plan or other health insurance coverage against any health care provider who is acting within the scope of that provider's license or certification under applicable State law.

**Justification of Provision:**

- In today’s delivery system, health plans routinely discriminate against whole classes of healthcare providers based solely on their licensure or certification.
- Health plan discrimination is not only wrong in principle, but is without justification based on the quality of health care provided by non-MD/DO providers.
- There is no evidence whatsoever that patients are less satisfied with the care typically provided by non-MD/DO providers versus the care provided by MDs and DOs. In fact, there is evidence to the contrary. As recently as