

HMOs need to offer patients more choice

Alan Immerman says chiropractic care shouldn't be discriminated against

The time has come for a little freedom in HMO plans. Right now, most HMO patients are enrolled in their HMO plan by their employers, regardless of employee preference, even though it is the employee/patient dollars that are being spent to purchase the coverage. No freedom there.

Right now most HMO patients are assigned to a specific HMO doctor regardless of patient preference. No freedom there.

Right now, when patients have back or neck pain, they are told that for treatment they can only have drugs, surgery or nothing, and that they cannot choose chiropractic spinal manipulation. No freedom there either.

The time has come for a change, for the advent of a little bit of freedom within HMOs. The federal Agency for Health Care Policy and Research (AHCPR), develops guidelines for the treatment of many medical conditions and the agency recently stated that spinal manipulation is one of the most effective forms of treatment for the extremely common condition of back pain. And the RAND Corporation recently found that 94 percent of all spinal manipulation is performed by chiropractors.

Nothing is more important to a patient in pain than his or her right to choose which type of medical treatment is received. The AHCPR found that drugs help reduce the pain of back problems, while spinal manipulation both reduces the pain and improves the function of the back. Many of the drugs have significant side effects, and the AHCPR reported that back surgery has many limitations. Therefore it is understandable why many back pain patients would prefer chiropractic care.

But right now the vast majority of the 1.4 million HMO enrollees cannot choose chiropractic care when they have back pain. The HMO administrators won't allow it and, because of the past misunderstandings between medical and chiropractic doctors, most HMO gatekeeper MDs will not prescribe it.

Thus the need for HB 2404, the Medical Freedom of Choice Act. This bill

would give people with back and neck pain the freedom to choose either medical drug and surgery treatment or chiropractic spinal manipulation. The HMOs would still be able to control quality and costs because they would determine which chiropractors delivered the treatment and how much treatment.

Unfortunately there is opposition to this bill from the HMOs. They call HB 2404 a "mandate," a word with terrible connotations in this day and age. But HB 2404 is no more or less of a mandate than any of the other 350 laws passed by the Legislature last session, or than the hundreds of other regulations which are in law and control the HMOs today.

Some opponents say that permitting patients to select chiropractic care would drive up costs. Yet a study done in 1993 by the Ontario Ministry of Health in Canada found that: "Spinal manipulation applied by chiropractors is shown to be more effective than alternative treatments for low back pain." And "there is an overwhelming body of evidence indicating that chiropractic management of low back pain is more cost-effective than medical management." The study was performed by independent health economists for a government agency and not by chiropractors or insurance companies.

Other opponents say that HB 2404 would dismantle the HMO "gatekeeper" system which only allows referrals to specialists if the gatekeeper MD gives permission. But chiropractors are not specialists so the argument does not stand.

One short quote from a former U.S. congressman says it all: "It is clear to many that the entire focus of the HMO approach to health care is to hold costs down. While that is commendable, it is also unacceptable if the result is a sharp decrease in the value and the choice. To prohibit chiropractic treatment, even when such is specifically requested by the patient of the gatekeeper MD, is to deny both quality and choice at the same time. For the state to tolerate discrimination against chiropractic care, under pressure from physicians and HMO operators, is having the state aiding and abetting in a criminal endeavor. 'He is treated best whose choice is restrained the least.'"

Alan Immerman is a chiropractor who serves as lobbyist for the profession. He is in private practice with a medical doctor in Phoenix.