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## More Medicaid Cuts Loom for Chiropractic

By Editorial Staff

Faced with massive budget shortfalls and growing Medicaid costs, lawmakers across the country have been forced to make tough decisions regarding health-care coverage for the nation's poor, elderly and disabled. According to the Kaiser Commission on Medicaid and the Uninsured, 49 states have cut, or plan to cut, Medicaid spending this year - including 32 states that made cuts to the program when the fiscal year began last summer.

Doctors of chiropractic have felt the brunt of these cuts, particularly compared with most other health-care practitioners. Last year, Vermont invoked an emergency rule that prohibited Medicare beneficiaries over the age of 21 from receiving coverage for chiropractic.<sup>1</sup> On Jan. 1, 2003, a series of sweeping cuts to Massachusetts' version of Medicaid, MassHealth, went into effect, including the complete elimination of chiropractic services, and on Jan. 10, California Gov. Gray Davis introduced a budget plan that removed chiropractic benefits from Medi-Cal.<sup>2,3</sup>

As we go to press, governors in at least six other states have presented budgets that would limit the number of visits to a chiropractor; increase copayments for Medicare patients; reduce reimbursements to providers; or eliminate chiropractic benefits completely. All told, the cuts could deprive hundreds of thousands of Americans from receiving chiropractic and other much-needed health-care services. Among the moves being considered:

- In **Indiana**, where the state Medicaid program serves approximately 750,000 people, lawmakers are considering dropping chiropractic and other "optional" services from the system - despite the fact that chiropractic was one of the most cost-effective and least-utilized benefits, and accounted for less than one-tenth of one percent of the state's total Medicaid costs in 1999 and 2000.<sup>4</sup>
- While **Michigan** Gov. Jennifer Granholm's first budget maintains the current level of Medicaid services for the state's 1.1 million children, seniors and disabled people, another 130,000 "healthy"

adults will lose access to chiropractic care (along with podiatric and dental coverage, except for dental emergencies).

Granholm defended the reductions, saying they allow the state to give more people at least limited coverage, rather than excluding them from Medicaid altogether, and return coverage to 40,000 adult caregivers who don't qualify for Medicaid themselves, but care for children who do.

"You simply can't spend more than you make, month after month, year after year, without digging yourself into a deep hole," Granholm said. "The days of spending beyond our means are over."<sup>5</sup>

- **Minnesota** legislators have proposed various methods to deal with a projected \$4.2 billion deficit over the next two fiscal years. One method devised by the Senate would stop coverage for chiropractic and podiatric services for patients enrolled in Medical Assistance, the state's version of Medicaid. The proposal would save the state about \$1.5 million annually.

According to Sen. Linda Berglin, chair of the Senate's funding division on health and human services, 15 states are considering eliminating coverage for chiropractic, podiatry, or both. Because the state and the federal government split the cost of these programs, however, the savings would actually be less than estimated. For the state to save \$1 in health-care payouts, it usually has to cut \$2 from the budget, Berglin added.<sup>6</sup>

- Chiropractic is just one of a handful of services that would be eradicated from **New Hampshire's** Medicaid program if Gov. Craig Benson's budget passes. In addition to chiropractic treatments, other health-care benefits such as eyeglasses; physical therapy; occupational therapy; adult day care; emergency care; and ambulance rides would no longer be covered.

"If this budget is implemented as presented, it would be a disaster for the state," commented Senate finance chair Richard Green.

In addition to the cuts, all of the state's health-care providers would be hit with a 5 percent reduction in pay for their services. State officials also are considering asking patients to make a copayment to receive care.<sup>7</sup>

- Under **New Jersey** Gov. James McGreevey's budget plan, even new taxes on hotel rooms, casinos, cigarettes and home sales won't be enough to save chiropractic from the chopping block. In addition to

dental coverage, chiropractic services would be eliminated from Medicaid and eligibility guidelines for health insurance would be tightened.<sup>8</sup>

- Claiming, "Mandated Medicaid spending has once again spiraled out of control," **Ohio** Gov. Bob Taft has proposed sweeping changes that would affect approximately 800,000 residents. If the cuts are adopted, chiropractic, dental, vision care, podiatric and psychological services will all be slashed from the Medicaid program, and reimbursement rates for individual providers, hospitals and long-term care facilities will be frozen for two years.

"I'm shocked the governor would propose this," said Peter Van Runkle, president of the Ohio Health Care Association. "This will not just affect poor people. It will affect everyone."<sup>9,10</sup>

- In **Texas**, House budget writers have proposed new regulations that would exclude more than 500,000 adults and children from receiving Medicaid by 2005. Revisions to the state Children's Health Insurance Program (CHIP) would remove chiropractic, dental, psychological, physical-therapy and speech-therapy services for children, and more than 4,500 adults would no longer be eligible for chiropractic, podiatry or psychological services. Households would also be hit with higher copayments and a \$14 monthly premium.

Representative Arlene Wohlgemuth (R-Burleson), who earlier in the year recommended abolishing CHIP altogether, said she expects the 17,000 pregnant women who would be disqualified under the new recommendations would continue to receive treatment "just out of the goodness of the American soul." Rep. Wohlgemuth, a two-time winner of the Family First Award, did not indicate what legal mechanism would facilitate the provision of this goodness.<sup>11</sup>

It appears that while the average American understands the true benefits that can be derived from chiropractic care, many legislators do not. The profession should continue to emphasize to legislators the cost-effectiveness and benefits of chiropractic, particularly compared with other forms of care that are not being eliminated from the Medicaid system. [Editor's note: Perhaps chiropractic's national leaders can take a lesson from the Texas Chiropractic Association, which commissioned a study on the efficacy of chiropractic care in the workers' compensation system. The results of that study appear on the front page of this issue.

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