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BULLETIN 16-03

TO: All Licensed Health Insurers, Medical Service Plan Corporations, Hospital Service Plan Corporations, and Hospital and Medical Service Corporations

FROM: Julie Mix McPeak, Commissioner Julie Mix McPeak

RE: Chiropractic Physician Coverage and Reimbursement

DATE: September 6, 2016

The Department has been made aware of the need for further clarification of Tenn. Code Ann. § 56-7-2404, relating to chiropractic physician services. The purpose of this Bulletin is to reaffirm the Department's long held interpretation of Tenn. Code Ann. § 56-7-2404 and offer further guidance related to whether the statute governs the method in which a chiropractic physician is reimbursed by a health insurer.

This Bulletin reaffirms the Department's previous interpretations of Tenn. Code Ann. § 56-7-2404 articulated in various Bulletins issued by the Department. Specifically, the Department maintains that the purpose of Tenn. Code Ann. § 56-7-2404 is to protect a consumer's access to chiropractic care. This position was most recently reaffirmed in a February 23, 2009, Bulletin, which stated:

> "An insurer should be prepared to reimburse those services rendered by a chiropractic physician to the same extent that it would reimburse services by a medical physician for treatment of the same condition. This also means in seeking the treatment of a covered medical condition, a covered person should be able to obtain services from either a chiropractic physician or other provider without having to pay a higher copayment or reach a higher deductible. Instances in which this is not true are tantamount to restrictions on access to care."

In addition, the Department has been made aware of reimbursement disagreements between health insurers and chiropractic physicians related to the appropriate reimbursement rates or reimbursement methodologies for services provided by a chiropractic physician. Specifically, the Department has been asked to issue guidance on the language found in Tenn. Code Ann. § 56-7-2404(a)(2) which states "…duly licensed chiropractors shall be entitled to participate in the plans

or contracts providing for the services to the same extent and subject to the same limitations as duly licensed medical physicians."

Although asked to weigh in on reimbursement rates to chiropractic physicians, the Department does not generally regulate, nor has any general statutory authority to regulate, reimbursement rates or reimbursement methodologies between medical physicians, including chiropractic physicians, and health insurers. Consistent with such limited regulatory authority, the Department takes the position that the purpose of Tenn. Code Ann. § 56-7-2404, read as a whole, is to protect a consumer's access to care. Tenn. Code Ann. § 56-7-2404 does not grant authority to the Department to regulate the reimbursement rates and reimbursement methodologies a health insurer offers to a chiropractic physician for medical services provided to insureds.

This Bulletin supersedes and replaces any other prior inconsistent guidance issued by the Department related to the interpretation of Tenn. Code Ann. § 56-7-2404.

Any questions regarding the intent of this Bulletin should be directed to the Insurance Division's Consumer Insurance Services Section, 6th Floor, Davy Crockett Tower, 500 James Robertson Parkway, Nashville, Tennessee, 37243, and/or (615) 741-2218.