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BULLETIN

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

FROM: Leslie A. Newman, Commissioner Leslie A Newman
Department of Commerce and Insurance

RE: Chiropractic Exclusions or Limitations, Discrimination Prohibited

DATE: February 23, 2009

The purpose of this Bulletin is to restate the Department's long held interpretation of T.C.A. § 56-7-2404, relating to coverage for chiropractic services. The Department has issued two previous bulletins on this matter, both stating the position that if an insurance policy pays for treatment of a condition by a physician, it must pay for treatment of that condition by a chiropractor.

It is the Department's position that the purpose of T.C.A. § 56-7-2404 is to prohibit discrimination against services provided within the lawful scope of practice of licensed chiropractic physicians offer those services offered by other health care providers. 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. Further, the statutory language controls, despite any language in a policy contract to the contrary.

Thank you for your attention to this matter. Any questions about the positions set forth in or the intent of this Bulletin should be directed to the Insurance Division, Fourth Floor, Davy Crockett Tower, 500 James Robertson Parkway, Nashville, Tennessee, 37243, and/or telephone number (615) 741-2176.

LAN/lnw