

My name is Dr. Erik W. Hemmett. I am a chiropractic physician with practices in South Burlington and here in Montpelier and am president of the Vermont Chiropractic Association.

I would like to say thank you to this committee and to Chair Senator Cummings for the opportunity to speak with you today as well as thank you to Senator Sirotkin for his work helping to offer more affordable access to chiropractic care.

I am here in support of a bill that lowers copay levels for chiropractic patients to that of primary care physicians. The Senate bill was introduced early; we corrected in the House bill, H.655, which on page two simply changes section three to state

“Health care services provided by a chiropractic physician may be subject to a co-payment requirement as long as the required co-payment amount is not greater than the amount of the co-payment applicable to care and services provided by a primary care provider under the health insurance plan.”

Not only would this bill make it more affordable for patients to access chiropractic care, it would support primary care physicians and other medical providers in making integrative referrals to chiropractic physicians as an alternative to prescribing medications including opioids for the treatment of acute and chronic musculoskeletal pain.

I would like to make it clear from the beginning this bill does **not** affect Medicaid and it does **not** seek to change the chiropractic physician status to primary care. Instead, S.224 simply reduces financial barriers to patients receiving chiropractic care.

The state of New Hampshire passed legislation that set patients’ out-of-pocket costs for chiropractic care services equal to out-of-pocket costs for primary care services with a goal of lowering patients’ costs and increasing their access to chiropractic services. I would like to read from the Executive Summary of the report that was just released.....

The conclusions reached in the report are the following:

- 1) “The results from the follow-up study confirm the findings from the original study that there is a negative and statistically significant relationship between the copayment level and the use of chiropractic care...lower copayment levels are associated with both increased likelihood of using the services and increased amount of services used for patients with any service use.
- 2) It is possible that chiropractic care has partial substitution effects for medical services.
- 3) There is evidence that increased use of chiropractic care is associated with lower opioid use...
- 4) It is important to note that although this analysis shows a relationship between lower copayment for chiropractic and physical therapy services and increased use of and cost of both these services and overall medical and pharmacy costs, ... study shows correlation not causation.

This issue of correlation versus causation cannot be overlooked or understated. Further, it should be noted that one of the problems with drawing conclusions about cost analysis in this study is that once the legislation was passed to equalize patient expenses between chiropractors and primary care physicians, insurance companies significantly raised the co-pays for primary care visits, distorting the information regarding the reason behind increased costs.

Additionally, we cannot ignore the costs that extend beyond this study. We must consider the decrease in indirect costs of worker absenteeism, crime and drug addiction, all of which are vast. I applaud your efforts to try to keep people from getting addicted to opiates in the first place in addition to dealing with the substantial societal effects once they arise. Back pain is a leading cause of Emergency and Primary Care visits, and research shows that traditional medications including opioids do not manage back pain well.

If part of the solution is to help primary care physicians and other providers dispense fewer opioids, we need to support them by making it more economically feasible for their patients with musculoskeletal pain to seek effective opioid alternatives like chiropractic care.

As seen in New Hampshire, lowering the chiropractic copay to the level of the primary care physician copay is one option that would help make it easier for primary care physicians and others to empower a patient to be compliant with a referral for chiropractic care as an alternative to opioids for their musculoskeletal pain.

Once again thank you for your time and consideration regarding this very important matter and we very much look forward to being part of a comprehensive solution to our state's and our nation's opioid crisis.