

**CTChiro**  
**Connecticut Chiropractic Association**  
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Statement of David Dziura, D.C.  
Insurance and Real Estate Committee  
House Bill 5485  
March 15, 2012

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Sen. Crisco, Rep. Megna and members of the committee:

My name is Dr. David Dziura. I am a licensed Chiropractic Physician and have practiced in the state of Connecticut for 28 years. I am representing the Connecticut Chiropractic Association today in regard to House Bill 5485, *An Act Concerning the Connecticut Health Insurance Exchange*.

HB 5485 creates a process where your committee will now develop a “benchmark plan” and submit it to the House and Senate for action. We believe this is one of the most important bills you will take up this session.

Last year, you enacted legislation to start the process of developing the state’s health insurance exchange. Many states are not implementing the exchange provisions at all or are only doing the minimum until the U.S. Supreme Court rules on the individual mandate issue. By contrast, Connecticut is right at the top of the list when it comes to states that are aggressively moving to meet the start date of January 1, 2014. We support your robust actions in this regard.

The 2011 Public Act had an implicit agreement: the exchange would be established and authorized with the understanding that all health plans listed on it would meet state coverage mandates in chapter 700c. That agreement would be breached under this bill, and I need to say we are very troubled by that prospect.

Coverage mandates ensure that consumers will receive tangible and guaranteed services for their premium dollars. If you do not require the plans to follow these mandates, there could be a race to the bottom as insurers seek to restrict services and costs.

Let me tell you the implications of this in the hypothetical case that chiropractic would not be included. First, it means we are out of the health insurance market. That’s a given. All of our patients would then have to pay out-of-pocket for their treatments. That’s after they pay the monthly premiums for their policy on the exchange, the deductibles and co-payments.

This will have the effect of denying chiropractic to consumers. Right now, it is estimated that between 68-72 percent of consumers with insurance have access to services of a licensed Chiropractor in Connecticut.<sup>1</sup> That will disappear once plans outside the exchange begin to mirror the coverage decisions of plans inside the exchange.

Implicit in the federal regulations of health care exchanges are appropriate plan design that takes into consideration established benchmarks plan, such as level of benefits provided in the largest small business plan, or the benefits of the largest federal employee plan. The four federal benchmark plans all include access to services of a licensed chiropractor, an indicator of the importance of having a more comprehensive plan.

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The public likes our services—we consistently have higher patient satisfaction ratings than comparable types of medicine. And, the need for chiropractic services is projected to grow significantly in the future.<sup>2</sup>

We urge you to keep to last year's agreement that requires all "qualified health plans" on the exchange to cover all services mandated in chapter 700c. You will need to delete the brackets on line 324 to reinstate this understanding.

Consumers have the right to expect they will receive comprehensive services in exchange for the premium dollars they pay. Keeping the existing coverage mandates will play a major role in fulfilling that expectation.

Thank you.

David B. Dziura DC, FACO  
Branford, CT

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<sup>1</sup> "Mandatory Coverage for Chiropractic," Review and Evaluation of Connecticut General Statutes. University of Connecticut, Center for Public Health and Health Policy. Erin Havens, MPA, MPH, 2010.

<sup>2</sup> U.S. Census Bureau, Population Profile of the United States, Nov. 10, 2010. *Internal Medicine* 164(18): 1985-1992.