

## WHAT IS IT?

Chiropractic care is a non-conventional medical practice involving examination and treatment of the spine, muscle and nerve systems through manual manipulation. Benefit coverage for chiropractic services is typically limited or excluded from base medical policies. Chiropractic policies can be purchased from:

- Most medical insurers, through riders that add or enhance chiropractic benefits.
- Specialty health care providers that offer stand alone, direct access chiropractic policies.

## WHY OFFER IT?

- Comprehensive chiropractic benefits can increase employee satisfaction with their medical plan.
- Part of a competitive benefits package in industries where worker retention is important.

## WHAT TYPES OF EMPLOYERS OFFER IT?

Organizations that wish to offer employees access to an alternate form of health care. According to a survey conducted by the International Foundation of Employee Benefit Plans, approximately 86% of employers offer some type of chiropractic coverage.

## WHAT SIZE EMPLOYERS OFFER IT?

Employers of any size.

## WHAT ARE THE CRITICAL UNDERWRITING OR PARTICIPATION REQUIREMENTS?

- Employer size, location and industry
- Employee demographics
- Plan design

## HOW MUCH DOES IT COST?

Monthly premiums vary based on selected plan design and insurance carrier. Approximate costs for a \$10 copay, 30 visits per year plan:

- Medical plan riders = additional 1-2% of health plan premium
- Stand-alone direct access policies = \$3 Employee Only, \$10 Family

## INFORMATIONAL LINK(S)

- [American Chiropractic Association](#)
- [Chiroweb](#)

### Providers:

- [American Specialty Health Plans](#)
- [Landmark Healthcare](#)

## PROS AND CONS

### PROS

- Provides employees with enhanced benefits and increased access to chiropractic services.
- Most medical carriers offer chiropractic riders and can build the service into the existing medical plan without creating an administrative burden for the employer.
- Studies have found that the use of chiropractic care for back problems resulted in an overall reduction in health care expenditures.

### CONS

- Additional cost

## NOTES

- Benefits for chiropractic services usually have a limit to the number of covered office visits in a year, or the reimbursement amount per visit. Some plans may have a separate deductible for chiropractic services.
- Chiropractic coverage under base medical plans varies notably by the type of policy. Enrollees in conventional, PPO, or point-of-service plans are almost twice as likely as HMO enrollees to have base plan chiropractic benefits. The benefit is typically grouped with physical therapy or rehabilitation services.



*This Fact Sheet is designed to provide a general overview of the benefit program, service, or regulatory act it describes. The information included in this document is not a substitute for legal or professional opinion relative to a plan sponsor's particular fact pattern. Your ArlenGroup consultant can answer more specific questions relative to its application for your organization.*