

# MEMO IN OPPOSITION

**FOR IMMEDIATE RELEASE: MARCH 13, 2006**

Re: S.5125 (Bonacic)/A.7488 (Gunther)

An act to amend education law in relation to the use of video fluoroscopy by chiropractors.

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This proposal, S.5125/A.7488, seeks to amend the education law to permit chiropractors to use video fluoroscopy for the “detection of structural imbalance, distortion, or subluxations in the human body.” The New York Health Plan Association (HPA) opposes this scope of practice expansion for reasons highlighted below:

- ◆ **This proposal exacerbates skyrocketing radiology costs that have triggered federal concerns about overuse of imaging services.** Diagnostic imaging is the fastest growing medical expenditure in the United States, with an annual 9% growth rate – more than twice that of general medical expenditures (4.1%) according to the American College of Radiology Web site (May 2004). Between 1999 and 2003, diagnostic imaging services paid under Medicare grew more rapidly than any other type of physician service – today costing taxpayers more than \$10 billion annually. Studies suggest that a greater supply of radiological services will drive utilization – much of it unwarranted – still higher. To respond to the steep and regionally varied increase in utilization, in 2005 the Medicare Payment Advisory Committee (MedPAC) called upon Congress to help set “standards for providers” performing and/or interpreting diagnostic imaging studies as a prudent way to address these concerns. We urge the state to wait for the promulgation of these standards before considering expanding the scope of practice of chiropractors in the area of radiology.
- ◆ **While utilization of radiology services in outpatient settings has increased, quality has suffered – most notably in chiropractic offices.** A study published in *Radiology* (publication of the Radiological Society of North America) concluded that one-third of outpatient providers had at least one serious radiology deficiency such as poor image quality or failure to monitor radiation. The report went on to note: “Chiropractors and podiatrists were more likely to fail than medical and surgical specialists.” That study reinforces a research paper published in the *American Roentgen Ray Society* in 2000 that found 78% of the non-radiologists’ offices had significant deficiencies that had to be subsequently corrected. Without appropriate oversight, expanding the radiological scope of practice for chiropractors will diminish quality and further increase health care costs.
- ◆ **Expanding chiropractic scope of practice to include video fluoroscopy is putting patients at risk.** Inappropriate exposure to radiation is a critical health concern. While manufacturers of video fluoroscopy equipment claim that exposure from these devices is lower than a standard x-ray, in fact, because the procedure immerses patients in gamma radiation for as long 15 minutes in a single session, the total radiation exposure may well exceed a standard x-ray. Additionally, video fluoroscopy equipment can produce very high radiation doses over short periods that have reportedly induced serious skin injuries in some patients. In light of these concerns, the

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American College of Radiology has called on medical institutions to “proactively manage to reduce patient radiation exposure” in the use of fluoroscopy. It would seem inappropriate to allow chiropractors – who already have been identified as being more likely to be of poor quality – the ability to expose their patients to this level of radiation.

- ◆ **Manufacturers of video fluoroscopy equipment make dubious claims.** Advocates for this legislation include manufacturers of video fluoroscopy equipment. In the past, manufacturers such as VF-Works promised chiropractors up to \$1 million in average annual income if they buy a franchise to operate video fluoroscopy equipment. At the core of this pitch was the requirement that 90 patients use this service every month. Typically, these services are billed at \$650 per episode – grossing more than \$700,000 annually. This again demonstrates how, in the medical field, supply can create demand. Another company, DMX points to the success its product has had in insurance settlements noting that use of this equipment “can dramatically increase settlement amounts for people who have sustained ligamentous injuries.” These claims further drive unnecessary utilization, undermine the tort system and puts patients at risk.
- ◆ **Many states limit chiropractors use of radiological services.** Many states place limits on chiropractor radiological services, including the ability to order but not perform certain tests or restrictions on what portion of the body can be examined. The vast majority of states limit radiological services to the vertebral column. S.5125/A.7488 allows chiropractors to utilize video fluoroscopy service to “detect structural imbalance or distortions” anywhere in the human body.

Expanding the scope of practice for chiropractors to include the use of video fluoroscopy is a prescription for unsafe patient radiation exposure, increased and unnecessary utilization of radiology services to the benefit chiropractors not patients. Accordingly, the New York Health Plan Association urges your opposition to S.5125/A.7488.

*The New York Health Plan Association represents 30 managed care health plans that provide comprehensive health care services to more than 6 million New Yorkers.*