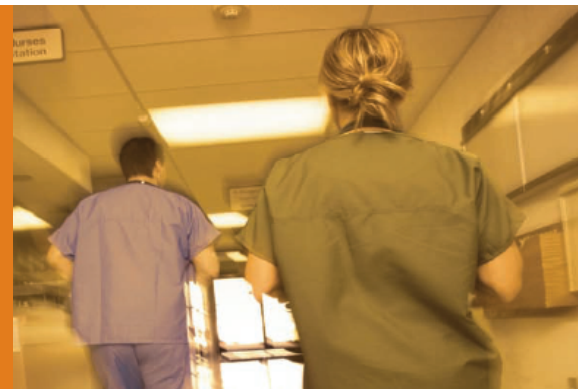


PHYSICIAN REFERRALS IN EHC PLANS

This backgrounder brief was prepared by the OCA for the benefit of its members and chiropractic office staff as part of ongoing initiatives designed to promote and enhance chiropractic coverage under extended health care plans.



THE ISSUE

Some OCA members have encountered patients whose extended health care (EHC) plans require a physician's (medical) referral before a claim for chiropractic services can be considered for reimbursement.

Although there is no evidence that this practice is becoming more prevalent, there is some concern that more plans may adopt referral requirements to combat rising health costs in general, and in response to increased costs in the wake of OHIP delisting.

BACKGROUND

EHC plans are increasingly important third-party payers of chiropractic services. There are hundreds of thousands of employer-sponsored plans across the province, and each one is unique. Employers sponsor the vast majority of EHC plans in Ontario, and it is not insurance companies but employers, responding to the needs of employees, that ultimately determine whether and how chiropractic services are covered under their plans.

PHYSICIAN REFERRAL REQUIREMENTS

Physician referral requirements under extended health care plans are not illegal. Because EHC plans are private plans, there is nothing prohibiting a plan from requiring a medical referral for chiropractic or any other covered service.

Almost without exception, EHC plans cover only services deemed "medically necessary" by a physician (MD). Chiropractic services are classified as "paramedical services" under EHC plans and, as such, chiropractors are grouped with coverage for practitioners such as physiotherapists, massage therapists and occupational therapists — whose services legitimately require medical referrals.

By and large, the majority of decision makers among EHC stakeholders (employers and other EHC plan sponsors, unions, insurance company personnel and benefits advisers) are unaware of the status of chiropractic under the Regulated Health Professions Act and The Chiropractic Act. By virtue of being "lumped in" with other professions where physician referrals are necessary, many decision makers automatically assume that a referral is also needed for chiropractic care.

Often, plan sponsors believe they are maintaining consistency with the principle of "medical necessity" to manage rising health plan costs. Some years ago, EHC plans saw sharp increases in massage claims. Plans that did not have medical referral requirements promptly instituted them and saw an immediate reduction in massage claims that were unrelated to specific injuries or conditions.

Health insurers generally do not condone the practice of requiring medical referrals for chiropractic care. However, because it is very simple for insurers to do so administratively, insurers will adjudicate claims on this basis if a plan sponsor so demands.

OCA Position / Recommendations ▶

PHYSICIAN REFERRALS IN EHC PLANS

OCA POSITION

There is a tendency to view physician referrals under EHC plans as an attempt to create barriers to chiropractic care. This is not necessarily the case. In most cases, plan sponsors are merely attempting to stem cost increases, and they view medical referrals as a convenient and proven means to this end.

Through communication and other advocacy efforts aimed at health plan sponsors, unions, health insurers and benefits advisers, the OCA continually attempts to educate these stakeholders and to reinforce the message that medical referrals are inappropriate and unnecessary:

Chiropractors are considered primary health care providers under Ontario law, therefore a medical referral is not required in order to receive treatment from a Doctor of Chiropractic (DC). Other health care professionals routinely recommend chiropractic care to their patients.

— EHC section, OCA website

RECOMMENDATIONS TO MEMBERS

Consistent with the goals of the OCA Patient Advocacy initiative, the most effective means of changing plan sponsor attitudes and behaviour is for OCA members and chiropractic staff to encourage patients to raise concerns about medical referrals to their employers and/or unions.

Members should reinforce “the business case for chiropractic care” in discussions with their patients and EHC stakeholders. Recommended key messages are:

- Chiropractic is a regulated primary contact health profession, recognized by statute in all Canadian provinces. Although many physicians routinely recommend or prescribe chiropractic treatment for their patients, a medical referral is not required.
- Chiropractic is one of only five health professions (including dentistry, medicine, optometry and psychology) that can perform and communicate a diagnosis and use the title “Doctor.”
- Requiring medical referral for chiropractic care is wasteful. It places an unwanted and unnecessary burden on over-worked physicians, as well as the provincial health care system.
- Many chiropractic patients, particularly those in rural and remote areas, do not have access to a physician and many rely on chiropractors as primary health care providers. Requiring a medical referral in such situation presents a particular hardship for patients.
- Chiropractic care is a non-invasive, effective and cost-effective health care service. Rather than increasing extended health care costs, chiropractic care can play a vital role in maintaining workforce health and productivity.

INQUIRIES

Questions and requests for assistance or further information may be directed to:

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