

114TH CONGRESS
1ST SESSION

H. R. 802

To require the Secretary of Defense to develop and implement a plan to provide chiropractic health care services and benefits for certain new beneficiaries as part of the TRICARE program.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 5, 2015

Mr. ROGERS of Alabama (for himself and Mr. LOEBSACK) introduced the following bill; which was referred to the Committee on Armed Services

A BILL

To require the Secretary of Defense to develop and implement a plan to provide chiropractic health care services and benefits for certain new beneficiaries as part of the TRICARE program.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Chiropractic Health
5 Parity for Military Beneficiaries Act”.

1 **SEC. 2. CHIROPRACTIC HEALTH CARE FOR RETIREES, DE-**
2 **PENDENTS, AND SURVIVORS.**

3 (a) PLAN REQUIRED.—Not later than August 31,
4 2015, the Secretary of Defense shall complete develop-
5 ment of a plan to provide chiropractic health care services
6 and benefits, as a permanent part of the TRICARE pro-
7 gram, for covered beneficiaries.

8 (b) CONTENTS OF PLAN.—The plan shall require
9 that a contract entered into under section 1097 of title
10 10, United States Code, for the delivery of health care
11 services shall—

12 (1) include the delivery of chiropractic services;

13 (2) require that chiropractic services may be
14 provided only by a doctor of chiropractic; and

15 (3) provide that a covered beneficiary may se-
16 lect and have direct access to a doctor of chiro-
17 practic without referral by another health practi-
18 tioner.

19 (c) IMPLEMENTATION OF PLAN.—The plan developed
20 under subsection (a) shall provide for implementation of
21 the plan to begin no later than January 31, 2016.

22 **SEC. 3. DEFINITIONS.**

23 In this Act:

24 (1) The term “chiropractic services”—

25 (A) includes diagnosis (including by diag-
26 nostic x-ray tests), evaluation and management,

1 and therapeutic services for the treatment of a
2 patient’s health condition, including neuro-
3 musculoskeletal conditions and the subluxation
4 complex, and such other services determined ap-
5 propriate by the Secretary and as authorized
6 under State law; and

7 (B) does not include the use of drugs or
8 surgery.

9 (2) The term “covered beneficiary” has the
10 meaning provided by section 1072(5) of title 10,
11 United States Code.

12 (3) The term “doctor of chiropractic” means
13 only a doctor of chiropractic who is licensed as a
14 doctor of chiropractic, chiropractic physician, or chi-
15 ropractor by a State, the District of Columbia, or a
16 territory or possession of the United States.

17 (4) The term “TRICARE program” has the
18 meaning provided by section 1072(7) of title 10,
19 United States Code.

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