Call To Arms: Why Activism Matters

Some insurance companies are covering alternative health care

December 1, 1994 By Bob Lederer

This year, in Washington State, something very unusual happened in the insurance industry: Policyholders were asked which additional services they desired. And then coverage of those services, requested by more than half the respondents, was offered as an optional add-on plan. What makes this even more unusual was that the requested services -- homeopathy, acupuncture and naturopathy, as well as preventative programs such as nutritional counseling and stress management -- are the type of alternative health care that the insurance industry as a whole has long been fighting tooth and nail.

Granted, the company, Blue Cross of Washington, only launched a small pilot program in two counties. But something of a trend may be budding. American Western Life, a California company, has a new wellness plan with somewhat similar benefits, available only in Southwestern states. Last year, Mutual of Omaha, a national company, announced coverage of low-fat diet, meditation, yoga and support groups. Other private insurance providers are closely following these experiments, whose successes may influence coverage decisions on a range of illnesses, including AIDS.

Rising public demand -- at times, vociferous demand -- for alternative treatments is motivating this trend, which flies in the face of a larger trend toward scaling back insurance payouts. Whether corporate-initiated or government-imposed, such coverage expansion offers glimmers of hope to the estimated 25-30 percent of PWAs using such non-standard approaches as acupuncture, herbs, massage and high-dose vitamins and minerals.

A small company based in Thousand Oaks, California called Alternative Health Insurance Services seems to offer the most comprehensive benefits. Along with conventional medical care, its plans cover acupuncture, chiropractic, massage and, in some cases, homeopathy and naturopathy. The firm offers benefits nationally through labor unions and associations such as the National Organization for Women and Co-op America. Advocacy by this company also led The Travelers and John Alden Life Insurance to clarify that their policies cover all state-licensed health practitioners, including, where licensed, acupuncturists and naturopaths.

Meanwhile alternative practitioners and their clients have been organizing politically. In 1992, a national chiropractors association won a 16-year-long federal lawsuit that convicted the American

Medical Association (AMA) of an anticompetitive conspiracy to destroy their profession. The AMA was ordered to repeal its prohibition of referrals to chiropractors. Forty-five states have now passed laws mandating that private insurers include chiropractic in some plans. Similar legal mandates exist in seven states for acupuncture and in one state for naturopathy. (But these mandates exempt self-insured plans used by many medium and large employwers that cover an estimated 44 percent of U.S. policyholders.)

Another victory came in 1990, when ACT UP/New York led a successful coalition effort to stop the National Institutes of Health from funding an insurance industry-organized computer database on so-called evaluations of alternative AIDS treatments. Activists charged the project would be a blacklist based on superficial reports by biased researchers to justify rejecting reimbursements. The database was shelved.

Last year, a coalition of community activists and nutritionists won an expansion of New York State's AIDS Drug Assistance Program (ADAP) to cover visits to affiliated nutritional counselors and prescriptions for a dozen nutritional supplements. (ADAP is federally funded in every state to fill the gap between Medicaid and private insurance by providing free prescription drugs and, in some states, medical services to people with HIV below certain incomes.) Another coalition, the New York HIV Nutrition Consortium, is now lobbying the state's Medicaid program to broaden similiarly its narrow list of covered vitamins and minerals. Both advocacy efforts point the way for activists in other states.

So while the future of alternative health coverage may be jeopardized by the trend toward managed care, decisions by both public and private plans are clearly subject to consumer pressure. Karin Timour of ACT UP/New York's Health Care Access Committee says that in the new cost-cutting climate, "PWAs will have to be much more active in advocating for themselves, to be proactive with insurance companies in ways most haven't been." William Dailey, director of the Center for the Advancement of Law and Medicine in Encino, California urges everybody, whether practitioners or patients, to get involved in requesting changes. "If you have insurance and they don't cover something you want them to, tell them that repeatedly and get others to do the same. The only way this country will have health care reform meaningful to the patient is if the patients demand it."

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