

Coverage for Acupuncture Treatment in Vermont  
Vermont Senate – Health and Welfare Committee

*Testimony of  
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### **Goals of Testimony**

- Affirm the important findings of the Medicaid Acupuncture Pilot Project
- Affirm the role of acupuncture therapy in the University of Vermont Medical Center’s Complex Pain Management Service

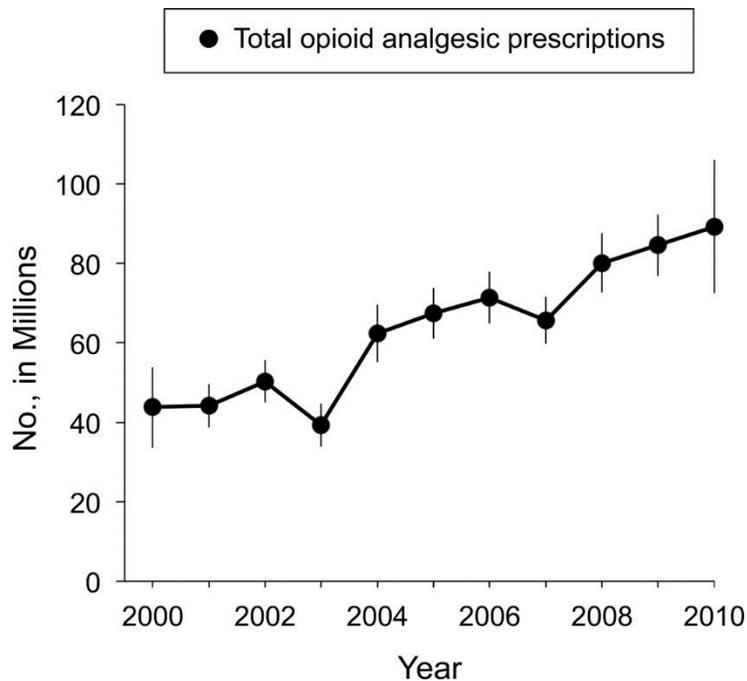
### **The Issue of Pain**

- 56% of adults report experiencing pain in a three month period. 11% of adults experience daily pain. (RL, 2015)
- Persistent pain often has impacts on an individual’s mental health, family system, and ability to work.

### **Societal Costs**

- 2012 Johns Hopkins study (Gaskin, 2012) using data from the 2008 Medical Expenditure Panel Survey noted
  - Additional health care costs related to pain treatment: 262 – 300 Billion (2010) dollars
  - Costs related to lowered productivity: \$299 – \$335 Billion (2010)
  - Total estimated annual cost: \$560 – \$635 Billion (2010)
    - heart disease (\$309 billion)
    - cancer (\$243 billion)
    - diabetes (\$188 billion)
- According to a study published by the Dartmouth Institute for Health Policy and Clinical Practice (Sites, 2014 ), between 2000 and 2010:

- the total number of prescriptions of opioid analgesics increased by 104%, from 43.8 million in 2000 to 89.2 million in 2010, a net increase of 45.4 million prescriptions
- the total number of adult Americans who received a prescription for an opioid analgesic rose approximately 80% from 15.3 million in 2000 to 27.5 million in 2010



- Compared with 2000, opioid consumers in 2010 were more likely to report:
  - poorer mental health status
  - cognitive limitations
  - no appreciable changes in self-reported physical health status, physical limitations; home, work, or school limitations; social limitations; physical activity

Self-reported health status and disability measures for adult opioid users, age and sex adjusted, MEPS 2000–2010<sup>a,b</sup>

Measure	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Estimated No. of adult opioid users, millions	15.3	16.9	17.7	13.3	21.2	23.8	23.4	22.5	24.6	25.9	27.4
Summary score, mean <sup>c</sup>											
PCS	43.5(38.8, 48.2)	43.5(39.9, 47.1)	43.9(40.5, 47.4)	41.9(37.5, 46.4)	43.5(40.1, 46.8)	42.3(38.6, 45.9)	42.8(39.4, 46.2)	42.3(38.3, 46.2)	41.8(37.9, 45.8)	42.1(38.5, 45.7)	41.7(37.3, 45.7)
MCS	48.5(43.7, 53.2)	48.4 (44.6, 52.2)	48.2(44.3, 52.1)	47.9(42.8, 52.9)	47.6(43.8, 51.4)	48.0(44.4, 51.7)	48.3(44.7, 51.9)	48.1(44.3, 51.9)	47.8 (44.2, 51.6)	47.8(43.9, 51.7)	47.6(52.3, 42.9)
Any limitation in physical function, % yes	29.2(29.0, 29.5)	29.1(28.9, 29.3)	29.1(28.8, 29.3)	28.9(28.7, 29.2)	28.9(28.7, 29.0)	28.8(28.7, 29.0)	28.7(28.4, 29.0)	28.6(28.4, 28.8)	28.5(28.3, 28.8)	28.4(28.2, 28.6)	28.4(28.1, 28.6)
Any work, home, or school limitation, % yes	24.1 (23.9, 24.3)	23.9(23.8, 24.2)	23.8(23.6, 23.9)	23.6(23.4, 23.8)	23.4(23.3, 23.6)	23.2(23.1, 23.4)	23.1(22.9, 23.3)	22.9(22.8, 23.0)	22.7 (22.6, 22.8)	22.5(22.4, 22.7)	22.4(22.2, 22.5)
Excellent to good health status, % yes	71.8(71.7, 71.9)	71.8 (71.7, 71.9)	71.9(71.7, 72.0)	71.9(71.7, 72.0)	71.9(71.7, 72.0)	71.9(71.8, 72.0)	71.9(71.7, 72.0)	71.9(71.8, 72.0)	71.9(71.7, 72.0)	71.9(71.8, 72.0)	71.9 (71.8, 72.0)
Excellent to good mental health	87.3(87.2, 87.3)	86.9(86.9, 87.0)	86.7(86.7, 86.8)	86.5(86.4, 86.5)	86.2(86.1, 86.2)	85.9(85.9, 86.0)	85.7(85.6, 85.7)	85.4(85.3, 85.4)	85.1(85.0, 85.1)	84.8(84.8, 84.8)	84.5(84.4, 84.5)

## Overdose

### CDC report January, 2016 (Rudd, 2016)

- Between 2000 and 2014, the age-adjusted drug overdose death rate increased in the US by more than 100% (6.2 to 14.7 deaths per 100,000)
  - Deaths from drug overdose during this interval numbered over a half-million individuals
  - Opioids were involved in 61% of drug overdose deaths during this period; the rate of opioid overdoses tripled during this period.

## Acupuncture

- (Vickers, 2012) Review of 29 studies comprising 14,597 patients found acupuncture effective for individuals suffering from chronic
  - Back and neck pain
  - Osteoarthritis
  - Headache
  - Shoulder pain

- A recent study from the National Institutes of Health (Nahin, 2016) evaluated available randomized controlled studies for acupuncture and a number of other complementary treatments and found it effective for back pain and osteoarthritis of the knee.
- Acupuncture is included in the American College of Physicians Clinical Practice Guidelines for chronic low back pain. (Qaseem, 2017)
- DHVA study:
  - Improved sleep
  - Less Fatigue
  - Less interference of pain in daily activities
  - Improved work capacity
- Rates of serious adverse outcomes approach zero.

### **An Integrative Approach to Chronic Pain at the University of Vermont Medical Center**

- Traditional medical approaches to addressing the issue of chronic pain have had limited success in relieving pain and improving function.
  - Overreliance on medication to address an issue which touches every aspect of a patient's physical, emotional, spiritual, and vocational wellbeing and has serious negative impacts on their – physical, emotional, spiritual, vocational - and has serious impacts on their family and support system has contributed to our current state of public health emergency resulting from opiate abuse and overdose.
- Patients deserve to be fully seen in their suffering and to receive care which gives them the best outcomes possible in terms of relief from their pain and improvement in their ability to function in the ways meaningful to them.
- Clinicians deserve support and collaboration in their efforts to help patients achieve these outcomes.
- With these realities in mind, the University of Vermont Medical Center commenced planning for a complex pain management service designed to provide patients suffering from chronic pain with an integrated, holistic

approach to care which utilizing a transdisciplinary team model. Patients will be offered:

- Comprehensive evaluation and diagnosis of their condition
- An evidence-informed range of therapeutic options which, while it may include medication and interventional approaches, will also include a broad range of complementary therapeutic options including acupuncture, cognitive behavioral therapy, mindfulness, massage therapy, physical therapy, yoga and other movement therapies, group medical visits, and nutrition education and intervention.
- Included in this process will be educational and psychological support of the patient's family or social support system.

There are inherent challenges in this work:

- The field of integrative care is young, and there is a tremendous amount to be learned about what combination of therapies and approaches results lead to the best outcomes for different groups of patients.
- Our current structure of reimbursement for medical care is not structured to accommodate this model.
- Forward progress in this work will require:
  - a thorough approach to measurement of patient outcomes and the value of our service
  - an ongoing commitment to learn from our experience and adopt promising new directions in therapy
  - active collaboration with payers

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