

# IMPLEMENTING COMPLEMENTARY APPROACHES TO PAIN MANAGEMENT IN A COMMUNITY HEALTH CENTER

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# DISCLOSURE

▶ None

# GOALS FOR TODAY

- ▶ Review complementary/integrative provider types
- ▶ integration of complementary health approaches at the Lane County Community Health Center
- ▶ Review OHP coverage issues for complementary health

# ACUPUNCTURE

- ▶ A profession, not a modality
- ▶ No diagnostic authority according to biomedical criteria, but will spot many red flags
- ▶ Because outside paradigm of Western biomedicine, can be valuable in virtually any pain condition
- ▶ If they are using herbs, make sure to be cautious of drug-herb interactions

# CHIROPRACTIC PHYSICIANS

- ▶ Doctorate-level providers with limited scope of practice
- ▶ Diagnostic authority
  - ▶ May help avoid (or hasten!) advanced imaging
- ▶ Great choice for conservative back pain management
- ▶ Some higher intensity may not be appropriate for people with osteoporosis or concern for vascular disease
  - ▶ When writing referral, please specify any concerns

# NATUROPATHIC PHYSICIANS

- ▶ Doctorate-level providers with broad scope of practice
- ▶ Full referral and diagnostic authority
- ▶ Can prescribe full scope of pharmaceuticals, up to and including schedule II
- ▶ Recognized as PCPs by OHP and most private insurers based in Oregon
- ▶ Some may choose to work as natural medicine specialists vs PCP
- ▶ Eligible for CMS incentive dollars for EHRs
- ▶ In FQHCs, eligible for HRSA “wrap” payments
- ▶ Not eligible for Medicare

# COMMUNITY HEALTH CENTERS OF LANE COUNTY

- ▶ Lane County: ~350,000 people
- ▶ OHP Members in Lane County: ~85,000
- ▶ Patients of CHC-LC: 25,000
  
- ▶ 6 clinic locations
  - ▶ 25 PCPs
  - ▶ 6 behaviorists
  - ▶ 1 part-time endocrinologist
  - ▶ 3 acupuncturists

# COMPLEMENTARY PAIN CARE

- ▶ One ND (speaker) works as employee, as both PCP and in-house natural medicine consultant
  - ▶ May bill OHP as PCP
  - ▶ Eligible for HRSA Wrap
  - ▶ Maintains primary care panel
- ▶ Acupuncturists as contractors
  - ▶ May bill OHP
  - ▶ Eligible for HRSA Wrap
  - ▶ Zachary Corbett will discuss....



# CHC LANE COUNTY WELLNESS COMMITTEE

- ▶ Monthly panel to review high-risk patients
  - ▶ Medical Director
  - ▶ Two Assistant Medical Director
  - ▶ Naturopathic Physician
  - ▶ Psychologist
  - ▶ Clinical Pharmacist
- ▶ Providers use EMR to request review
- ▶ Feedback includes recommended non-pharm therapies, tapering schedule, behavioral health considerations

# OHP SERVICE COVERAGE

- ▶ Goals to increase function and quality of life, restrict harmful treatment, improve self-management
- ▶ Since 2016, Oregon Health Plan has had broad coverage for complementary pain approaches
  - ▶ <http://www.oregon.gov/oha/herc/FactSheet/Back-policy-changes-fact-sheet.pdf>
- ▶ Prioritized List of Services: visits and procedures have to meet “paired-code” requirements (CPT and ICD)
  - ▶ <https://www.oregon.gov/oha/hsd/ohp/pages/prioritized-list.aspx>

# OHP COVERAGE FOR ACUPUNCTURE

- ▶ See Guideline Note 92 for details
- ▶ Pregnancy (back and pelvic pain, hyperemesis, breech) (Line 1)
- ▶ Tobacco Dependence (Line 5)
- ▶ HIV (Line 12)
- ▶ Substance-Induced Mood, Anxiety, Delusional Disorders (Line 66, 69)
- ▶ Depression and Mood Disorders (Stroke Only) (Line 202)
- ▶ Scoliosis (Line 361)\*\*
- ▶ Conditions of the Back and Spine (Line 401)\*\*
- ▶ Migraine (Line 409)
- ▶ Osteoarthritis (Line 461)
- ▶ Tension Headaches (Line 538, below “the line”)

# OHP COVERAGE FOR CHIROPRACTIC

- ▶ Rheumatoid Arthritis and Other Inflammatory Arthropathies (Line 46)
- ▶ Neurological Dysfunction in Posture and Movement Caused by Chronic Conditions (Line 292)
- ▶ Scoliosis (Line 361)\*\*
- ▶ Conditions of the Back and Spine (Line 401)\*\*
- ▶ Peripheral Nerve Entrapment (Line 415)
- ▶ Disorders of Shoulder, including strain/sprain grades 4-6 (Line 417)
- ▶ Osteoarthritis (Line 461)
- ▶ Brachial Plexus Lesions (Line 465)
- ▶ Tension Headaches (Line 538, below the line)
- ▶ Sprains and Strains (Line 605, below the line)

# OHP GUIDELINE NOTE 56

- ▶ Pertaining to lines 361 and 401
- ▶ For patients who are determined to be low risk on the assessment tool (START-BACK), the following services are included on these lines:
  - ▶ Office evaluation and education
  - ▶ Up to 4 total visits, consisting of the following treatments: OMT/CMT, acupuncture, and PT/OT.
  - ▶ Massage, if available, may be considered.

# OHP GUIDELINE NOTE 56

- ▶ For medium- or high-risk patients on START-BACK:
  - ▶ Office evaluation and education
  - ▶ Cognitive Behavioral Therapy
  - ▶ 30 visits per year of any combination, and must include documentation of measurable progress using evidence based objective tools (e.g. Oswestry, Neck Disability Index, SF-MPQ, and MSPQ)
    - ▶ 1) Rehabilitative therapy (physical and/or occupational therapy), if provided according to Guideline Note 6
    - ▶ 2) Chiropractic or osteopathic manipulation
    - ▶ 3) Acupuncture

# TRILLIUM COVERAGE FOR CHIROPRACTIC AND ACUPUNCTURE

- ▶ 8 combined visits, regardless of diagnosis, no PA required.
- ▶ Additional visits require request for PA based on coverage guidelines from OHP
- ▶ Common uses not covered by OHP
  - ▶ Acupuncture – IBS, anxiety, insomnia, eczema, fibromyalgia
  - ▶ Chiropractic – costochondral pain, non-specific musculoskeletal pain

# NATURAL PRODUCTS

- ▶ OHP has guidance to cover if there is high-quality evidence
  - ▶ Natural Medicines Comprehensive Database
  - ▶ [naturalmedicines.therapeuticresearch.com](http://naturalmedicines.therapeuticresearch.com)
  - ▶ Pharmacist-maintained database of natural products, with review of safety, efficacy, dosage.
- ▶ Trillium will cover if Natural Medicines supports
  - ▶ Effective (A)
  - ▶ Likely Effective (B)



# PAIN-RELATED DIETARY SUPPLEMENTS COVERED BY TRILLIUM

- ▶ B-Vitamins
  - ▶ Migraine
- ▶ Vitamin D
  - ▶ Statin-Induced Myalgia, Back Pain
- ▶ Magnesium
  - ▶ Migraine, Back Pain
- ▶ CoQ10
  - ▶ Migraine
- ▶ Glucosamine/Chondroitin
  - ▶ Osteoarthritis
- ▶ Fish oil
  - ▶ Dysmenorrhea, Back Pain, Fibromyalgia

# MASSAGE AND YOGA: CHALLENGES WITH COVERAGE

- ▶ Listed under evidence-based approaches by OHA and HERC for chronic low back pain
- ▶ Massage therapists are licensed (LMT), and there are CPT codes they can use, but not typically credentialed under insurance
- ▶ Yoga teachers and therapists aren't licensed at all, and there are no CPT codes for yoga instruction
  - ▶ The profession is developing, however, and people may use the initials RYT – Registered Yoga Therapist

# MASSAGE AND YOGA: POTENTIAL SOLUTIONS

- ▶ Some PT and DC offices may train RYT's as "PT aids" allowing them to offer billable services (eg, "neuromuscular re-education")
- ▶ Some insurances will allow massage therapists to provide "manual therapy" as extender under a DC (MD/DO/ND)
  - ▶ Main clinician must be present in the building at time of service
  - ▶ It also requires periodic check-in with main clinician to certify ongoing care
- ▶ Unclear if OHP will allow the above practices
- ▶ It is allowable to just hire a yogi/LMT without billing