

## Non-Pharmaceutical Approaches to pain Management

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Policy  
Resources  
Education  
Value  
Evidence Based  
Natural  
Treatment

# PREVENT

New Mexico Chiropractic Association, Executive Board member  
American Chiropractic Association, Alternate Delegate  
Bernalillo County Opioid Accountability Initiative, member  
District 4 Coalition (Albuquerque), President  
UNMH Human Research Protections Office, Committee member  
National Ski Patrol, Alpine Patroller  
Adaptive Sports Program, Instructor

## Service

**Chronic Pain** is defined as non-cancer, non-end of life pain lasting more than three months or longer than the duration of normal tissue healing.

**Acute Pain** is defined as expected, time-limited pain caused by a specific disease or injury.

## Types of Pain

Chiropractic is a health care profession that focuses on disorders of the musculoskeletal system and the nervous system, and the effects of these disorders on general health. Chiropractic services are used most often to treat neuromusculoskeletal complaints, including but not limited to back pain, neck pain, pain in the joints of the arms or legs and headaches.

#### WHAT IS CHIROPRACTIC MEDICINE?

In January 2015, the Joint Commission, the organization that accredits more than 20,000 health care systems in the U.S. including every major hospital, recognized the value of non-drug approaches in the face of the U.S. opioid abuse epidemic by adding **chiropractic and acupuncture** to its pain management standard.

#### The Joint Commission

Hosted by the American Chiropractic Association (ACA), NCHM is a nationwide observance held each **October**. The event helps raise public awareness of the benefits of chiropractic care and its natural, whole-person, patient-centered approach to health and wellness.

#### National Chiropractic Health Month

- The CDC Guideline for Prescribing Opioids for Chronic Pain and the National Pain Strategy both encourage medical doctors to utilize **nonpharmacologic conservative care** and consider non-addictive alternative options, behavioral changes and non-addictive pain relievers.

#### CDC and National Pain Strategy

- A study that examined large Medicare datasets revealed that in geographic locations with more **doctors of chiropractic** and a higher level of Medicare payments for chiropractic manipulation, there were fewer patients taking **opioid drugs**.

### **Prevention Studies**

“The Human Service Department/Medical Assistance Division should expand medically assisted treatment options for persons living with opioid addiction as well as expand reimbursement options for alternative treatment modalities for chronic pain (chiropractic, massage, acupuncture, pharmacists and pharmacist clinicians). These expansions will support increased numbers of providers treating persons with opioid addiction and could reduce the frequency of opioid prescription for persons living with chronic pain.”

**Prescription Drug Misuse and Overdose Prevention  
and Pain Management Advisory Council 2013  
Recommendations**

- Medicaid in New Mexico does not reimburse chiropractic physicians.
- 27 state Medicaid Agencies reimburse chiropractic physicians.

### **Medicaid**

**Increase the number of licensed healthcare professionals in New Mexico.** Such providers include physicians, physician assistants, certified nurse practitioners, **chiropractors**, dentists, alternative healthcare practitioners, and diverse cultural healers.

Enable all licensed practitioners to practice to their full scope of practice and receive Medicaid reimbursement.

### **NM First 2012 Town Hall**

**3. Reimburse Chiropractic Physicians:** Reimburse chiropractic doctors through private insurance plans and Medicaid to provide full services and education to patients.

**Presbyterian  
Community Health  
Forums**

NOW, THEREFORE, BE IT RESOLVED BY THE SENATE OF THE STATE OF NEW MEXICO that the secretary of human services be requested to charge the medical assistance division of the human services department with convening a working group to explore the reimbursement of chiropractic medicine services through the state's medicaid program; and

PASSED: 40-0

**Senate Memorial 070  
2016**

We are pleased to inform you that the New Mexico Public Health Association Board voted to endorse your organization's legislation to get Medicaid to reimburse for chiropractic services, to have parity in co-payments with primary care providers for physical medicine providers, and equal access to chiropractic physicians for primary care.

**New Mexico  
Public Health Association**

NOW THEREFORE BE IT RESOLVED, that the National Congress of American Indians (NCAI) does hereby support the inclusion of Doctors of Chiropractic, Doctors of Naturopathic Medicine and Licensed Acupuncturists at Indian Health Service and Tribal facilities; and

BE IT FURTHER RESOLVED, that this resolution shall be the policy of NCAI until it is withdrawn or modified by subsequent resolution.

**National Congress of  
American Indians Resolution  
#SD-15-027**

Review of Systems  
Examination  
Diagnostic Testing (Laboratory, Imaging, Physiologic)  
Diagnosis  
Report of Findings  
Treatment  
Make Appropriate Referrals

## **Chiropractic Physician Services**

**Level 1-** Botanicals, Trigger point injections, regenerative therapy injections, muscle relaxants, Non Steroidal Anti-Inflammatory Drugs,

**Level 2-** Proposed additional education and training for management of primary care medications and expanded scope of practice.

## **Advance Practice Certification**

Spinal Manipulation  
Myofascial Therapy  
Soft Tissue Mobilization  
Rehabilitative Exercises  
Dry Needling  
Laser Therapy  
Nutritional Therapy  
Postural Rehabilitation  
Trigger Point Injections (APC)

## **Modalities**

“When scope of practice restrictions restrain competition and are not closely tied to legitimate policy goals, they may do more harm than good.”

<https://www.ftc.gov/news-events/blogs/competition-matters/2014/03/doctor-or-nurse-practitioner-will-see-you-now>

## **Federal Trade Commission**

“Residents provide full diagnostic and management services of musculoskeletal and neuromuscular conditions under the mentorship of senior VA doctors of chiropractic (DCs). This includes team-based management of complex conditions in collaboration with other medical specialists and healthcare providers. Residents also engage in clinical educational rotations through services including primary care, medical or surgical specialties, mental health, and rehabilitation disciplines.”

Veterans Affairs

### Expand Residencies for Chiropractic Physicians

- *Chiropractors at the community health centers in Connecticut are integrated into primary care as chiropractic specialists with the specific task of evaluating and managing patients with chronic pain. Chiropractors should be integrated in order to reduce the use of opioids for neuromusculoskeletal pain conditions.*
- *At least one FQHC in NM has added a chiropractor.*

### Federally Qualified Health Centers

“This strategy also calls for coordination and integration of clinical, behavioral and complementary health strategies, including **chiropractic services** such as spinal manipulation for the treatment of back and neck pain in order to reduce pain and disability.”

U.S. Surgeon General

### Residencies in Federally Qualified Health Centers

- Many insurance plans are “closed” to new providers.
- Some plans only reimburse for spinal manipulation, and not other services
- No Parody

### Challenges with Insurance

- All of the conditions that chiropractic physicians treat are “Primary Care” conditions.
- Insurance companies impose a specialist copay that is usually reserved for higher reimbursed procedures, interventions, and surgeries.
- High deductibles and copays impede many patients from being able to complete their treatment plans.

### **Copays and Deductibles**

- VBA stroke is a very rare event in the population. The increased risks of VBA stroke associated with chiropractic and PCP visits is likely due to patients with headache and neck pain from VBA dissection seeking care before their stroke. We found no evidence of excess risk of VBA stroke associated chiropractic care compared to primary care.

• <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2271108/>

### **Safety**

- Beginning Jan. 1, 2016, the Oregon Health Plan (OHP) will prioritize chiropractic and other complementary therapies over painkillers or surgery for patients with back pain.
- Under the new policy, OHP patients will be able to receive chiropractic treatment - as well as acupuncture, cognitive behavioral therapies, osteopathic manipulation and physical and occupational therapy - up to 30 times a year

### **Other States**

#### **59A-47-28. Coverage for service of chiropractor.**

All individual and group subscriber contracts delivered or issued for delivery in New Mexico, which, on a service basis or on an indemnity basis, or both, provide for treatment of persons for the prevention, cure or correction of any illness or physical or mental condition shall include coverage for the services of a chiropractor.

History: Laws 1984, ch. 127, § 879.26.

### **NM Compilation Commission**

**7-9-93. Deduction; gross receipts; certain receipts for services provided by health care practitioner.**

(3) "health care practitioner" means:

(a) a chiropractic physician licensed pursuant to the provisions of the **Chiropractic Physician Practice Act** [Chapter 61, Article 4 NMSA 1978];

**\*New Mexico Legislation**

#### **Study: Chiropractic Care is Cost Efficient Treatment for Lower Back Pain**

Approximately 80% of Americans experience back pain in the course of their lives. The National Institute of Neurological Disorders and Stroke at the National Institutes of Health estimates that "Low back pain (LBP) treatment costs more than \$50 billion per year. In addition, indirect costs for LBP have been estimated at between \$7.4 billion and \$19.8 billion per year, and the incremental medical care cost for LBP are estimated to be an additional \$26 billion per year."

**Research**

**E. "chiropractic physician" includes doctor of chiropractic, chiropractor and chiropractic physician and means a person who practices chiropractic as defined in the Chiropractic Physician Practice Act;**

**61-4-2. Definitions.**

The researchers found "statistically significant lower costs in episodes of care initiated with a DC as compared to an MD... Paid costs for episodes of care initiated with a DC were almost 40% less than episodes initiated with an MD. Even after risk adjusting each patient's costs, we found that episodes of care initiated with a DC were 20% less expensive than episodes initiated with an MD."<sup>2</sup>

The researchers estimate that if the cost savings realized were extrapolated to a real population who initiated care with a DC, the cost benefit would translate to more than \$2.3 million per year in savings.

**Research**



1-2 Liliedahl, R.L., Finch, M.D., Axene, D.V., Goertz, C.M. "Cost of Care for Common Back Pain Conditions Initiated With Chiropractic Doctor vs Medical Doctor/Doctor of Osteopathy as First Physician: Experience of One Tennessee-Based General Health Insurer." *JMPT*, October 21, 2010.

<[http://www.jmptonline.org/article/S0161-4754\(10\)00216-2/fulltext](http://www.jmptonline.org/article/S0161-4754(10)00216-2/fulltext)>

## Research

"There are some advantages in using TCM for opiate detoxification, including

- less harmful side effects,
- high safety and ideal effects in the inhibition of protracted withdrawal symptoms and relapse.
- Co-administration of TCM with modern medicine shows some synergistic effects in detoxification."

## Traditional Chinese medicine in treatment of opiate addiction

"TCM has been practiced in China for more than 2000 years, and for the past 200 years has been used in treatment of drug addiction. Ten Chinese medicines for the treatment of opiate addiction have been approved by the Chinese State Food and Drug Administration (SFDA), and at least 6 are in clinical trials."

## Traditional Chinese medicine in treatment of opiate addiction

<http://www.bchealthcouncil.org/Bernalillo-County-Opioid-Accountability-Initiative>

<http://nmchiro.org/>

<https://www.acatoday.org/>

## \*Links

<http://americanpainsociety.org/about-us/press-room/study-shows-tai-chi-can-help-relieve-chronic-neck-pain>

[http://docs.phs.org/idc/groups/public/@phs/@marketing/documents/phscontent/pel\\_00149134.pdf](http://docs.phs.org/idc/groups/public/@phs/@marketing/documents/phscontent/pel_00149134.pdf)

<https://www.acatoday.org/Portals/60/Docs/NCHM/ACAnondrugApproach16nchmFINAL.pdf?ver=2016-08-08-170257-000>

## \*References

<https://www.acatoday.org/News-Publications/ACA-News-Archive/ArtMID/5721/ArticleID/14/Health-Care-Reform>

Acta Pharmacologica Sinica 2006 Oct; 27 (10): 1303-1308

Traditional Chinese medicine in treatment of opiate addiction<sup>1</sup>

Jie SHI<sup>2</sup>, Yan-li LIU<sup>3</sup>, Yu-xia FANG<sup>4</sup>, Guo-zhu XU<sup>2</sup>, Hai-fen ZHAI<sup>2</sup>, Lin LU<sup>2,5,6</sup>

## References

<http://www.ncai.org/resources/resolutions/support-of-the-inclusion-of-doctors-of-chiropractic-doctors-of-naturopathic-medicine-and-licensed-acupuncturists-at-indian-health-service-and-tribal-facilities>

[http://www.rehab.va.gov/PROSTHETICS/chiro/Residency\\_Programs.asp](http://www.rehab.va.gov/PROSTHETICS/chiro/Residency_Programs.asp)

<http://www.cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm>

## References

<http://nationalpainreport.com/commentary-chiropractic-part-of-the-solution-to-americas-pain-epidemic-8827591.html>

<http://nashp.org/wp-content/uploads/2016/09/Pain-Brief.pdf>

## References