Integrative Health and Medicine

Doing Well by Doing Good: Building the Case for Broad Workforce Partnerships

Finding the Right Fit: The Workforce Needed to Support the ACA
May 2, 2014

John Weeks
Academic Consortium for Complementary and Alternative Health Care

Project for Integrative Health and the Triple Aim
of the Center for Optimal Integration: Creating Health
Overview

• Who: The players
• Why #1: Shifting Incentives
• How: Examples (and a project to help create value)
• Why #2: *Health creation*

*I have no economic conflicts of interest relative to this presentation.*
Who?
## Workforce #1: Licensed Integrative Health Disciplines

*Expansion, Maturation, Recognition*

<table>
<thead>
<tr>
<th>Profession</th>
<th>Accrediting Agency Established</th>
<th>US Dept. of Education Recognition</th>
<th>Recognized Schools or Programs</th>
<th>Nat’l Exam Created</th>
<th>State Regulation</th>
<th>Total Licensed Practitioners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acupuncture and Oriental medicine</td>
<td>1982</td>
<td>1990</td>
<td>61</td>
<td>1982</td>
<td>44</td>
<td>28,000</td>
</tr>
<tr>
<td>Chiropractic</td>
<td>1971</td>
<td>1974</td>
<td>15</td>
<td>1963</td>
<td>50</td>
<td>72,000</td>
</tr>
<tr>
<td>Massage therapy</td>
<td>1982</td>
<td>2002</td>
<td>88*</td>
<td>1994</td>
<td>44</td>
<td>280,000</td>
</tr>
<tr>
<td>Naturopathic medicine</td>
<td>1978</td>
<td>1987</td>
<td>7</td>
<td>1986</td>
<td>18</td>
<td>5500</td>
</tr>
</tbody>
</table>

*Of the roughly 1400 schools, the number accredited via the US Dept. of Education-recognized specialized accrediting agency.

Source: ACCAHC’s Clinicians’ & Educators’ Desk Reference on the Licensed Complementary & Alternative Healthcare Professions (2014)
Workforce #2: Integrative MDs and Holistic Nurses

- Board Certified, American Board of Integrative and Holistic Medicine (ABIHM) 2800*
- Board Certified, American Board of Integrative Medicine (ABPS) [2014 start]
- Fellows, Arizona Center for Integrative Medicine 1,100*
- Board Certified Holistic Nurses (BC-HN) 900

*Portions of total, self-identified “integrative medical doctors” which by estimates may total 10,000-15,000 who routinely practice “integrative medicine.”
Definition of Integrative Medicine

“Integrative Medicine is the practice of medicine that reaffirms the importance of the relationship between practitioner and patient, focuses on the whole person, is informed by evidence, and makes use of all appropriate therapeutic approaches, healthcare professionals and disciplines to achieve optimal health and healing.”

Consortium of Academic Health Centers for Integrative Medicine (55 AMCs)
On Meeting the Nation’s Primary Care Needs

“This is the best compendium of thoughtful analysis and information on these disciplines that exists. I admire the scholarship of this document.”

Richard “Buz” Cooper, MD
Why?
Shifting Incentives

“When I first heard of integrative medicine in 2006, I thought of it as an expense...

Ken Paulus, CEO, Allina Health System

Weeks J. Health System & Military Leaders Say Cost and Pain are Motivating Inclusion of Integrative Medicine
http://theintegratorblog.com/index.php?option=com_content&task=view&id=795&Itemid=189
Shifting Incentives

“... but as the Affordable Care Act's payment structure kicks in that supports keeping people healthy, integrative medicine will be an asset.”

Ken Paulus, CEO, Allina Health System (2011)

Weeks J. Health System & Military Leaders Say Cost and Pain are Motivating Inclusion of Integrative Medicine
http://theintegratorblog.com/index.php?option=com_content&task=view&id=795&Itemid=189
... if there is Big Money in integrative health and medicine it is in saving money/lowering costs ...
"I'm tired of this talk that there is no evidence for cost-effectiveness of complementary and integrative medicine. There is evidence. We need to move onto phase two and look at how transferable these findings are. We can take this evidence and run."

Patricia Herman, MS, ND, PhD
RAND Corporation


David Eisenberg, MD
Harvard University
# Formal Inclusion: Integrative Health and “CAM” in the ACA

<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
<th>Area</th>
<th>Language Used</th>
</tr>
</thead>
<tbody>
<tr>
<td>2706</td>
<td>Non-Discrimination in Health Care</td>
<td>Payment</td>
<td>“...license or certification ...”</td>
</tr>
<tr>
<td>3502</td>
<td>Community Health Teams/Patient-Centered Medical Homes</td>
<td>Delivery</td>
<td>“may include doctors of chiropractic, licensed CAM practitioners ...”</td>
</tr>
<tr>
<td>4001</td>
<td>National Prevention, Health Promotion and Public Health Council</td>
<td>Health promotion</td>
<td>“integrative health care” “integrative health care strategy” “integrative health” “integrative health practitioners” “integrative health practices”</td>
</tr>
<tr>
<td>5101</td>
<td>National Health Care Work Force Commission</td>
<td>Workforce</td>
<td>“doctors of chiropractic” “licensed CAM providers, integrative health practitioners”</td>
</tr>
<tr>
<td>6301</td>
<td>PCORI-CER</td>
<td>Research</td>
<td>“experts in integrative health and primary prevention strategies” “State-licensed integrative health care practitioner”</td>
</tr>
</tbody>
</table>

For details see: *Integrator Guide*: Sections on CAM and Integrative Health in the Affordable Care Act
How?
Collaborate & Engage

- Data
- Best practices
- Webinars
- News pushes
- Face-to-face

PIHTA
PROJECT FOR INTEGRATIVE HEALTH AND THE TRIPLE AIM

Integrative Health Values
- Treat the whole person
- Support self-care
- Use least invasive first
- Partner with others
- Create health

Goals of the Triple Aim
- Enhance patient experience
- Reduce costs
- Improve population health

Sharing Supportive Evidence - Collaborating on Best Practices

www.optimalintegration.org
Some Populations and Cost Outcomes

Hospitals & Health Systems

• The Ornish Lifestyle Program
  – Group-based/support
  – Meditation
  – (Very) low-fat diet
  – Exercise

• Outcomes
  – 1993: First publication of reversal CAD
  – 1999: Highmark BCBS estimates $16,000 cost savings per participant+
  – 2010: After a 17 year campaign for recognition, Medicare covers
  – More recent studies: lifestyle changes can positively alter gene expressions

+ Two-Year Results of Highmark Blue Cross Blue Shield's Dr. Dean Ornish Program For Reversing Heart Disease Demonstrates Outstanding Lifestyle Improvements
Some Populations and Cost Outcomes

Hospitals & Health Systems

- Allina estimates $2000 savings per in-patient via integrative care program (acupuncture, massage, aromatherapy, plus)
  - Lori Knutson, RN, BC-HN, Director of Integrative Health, Allina Health System, interview in Natural Medicine Journal


- Duke integrative wellness program (Prospective Health) estimates $2200 savings per client

Populations and Cost Outcomes

Employers

• Acupuncture trial with Ford Motor Company employees lowers medication use 58%
  Kenneth R. Pelletier, PhD, MD (hc) et al, An Integrative Medicine Intervention in a Ford Motor Company Assembly Plant.

• Whole practice integrative medicine treatment via naturopathic doctors lowers CV risk in Canada Post employees, saves estimated $1138 per employee/year
Some Populations & Cost Outcomes

Insurers & 3rd Party Payers

• Access chiropractor first saves in treatment of lower back pain (LBP)
  – **20%-40% lower cost** if see DC first for LBP
    

• Cost of insureds using CAM disciplines significantly less that those not using CAM
  – **$1420 less annual expense** in those with large dz. burden, “which more than offset $158+ in those with lower burden” (back pain, fybromyalgia)
    

BC, BS/Regence, Group Health+
“Positive outcome themes included increased options and hope, increased ability to relax, positive changes in emotional states, increased body awareness, changes in thinking that increased the ability to cope with back pain, increased sense of well-being, improvement in physical conditions unrelated to back pain, increased energy, increased patient activation, and dramatic improvements in health or well-being ... “

Cherkin-Sherman
Group Health Research Institute

Unanticipated benefits of CAM therapies for back pain: an exploration of patient experiences
Some Populations and Cost Outcomes

Returning Care to Communities

Direct-Entry (Certified Professional) Midwives and Homebirth: Estimated $2.7 million in Medicaid cost avoidance per biennium via midwifery care in Washington State (2008)

"Midwives have a central focus in our strategic plan. With low-risk mothers choosing home birth, we know that the C-Section rate is 8 percent, while it's around 20 percent in an obstetrics facility. We are hoping Washington State can double out-of-facility births in the next two or three years."

Jeffrey Thompson, MD, MPH, CMO
Washington State Medicaid Program

High Marks for Patient Experience in Integrative Primary Care
Naturopathic Doctor Led Teaching Clinic

“From the perspective of ‘patient experience,’ the Bastyr Natural Health Center ranks among the top of all primary care facilities in the northwest. The clinics were rated on four categories: timeliness, care and appointments; provider communication; courteousness of office staff; and the patient's ‘overall rating of the provider.’“

Washington Health Alliance (2014)

Your Voice Matters: Patient Experience with Primary Care Providers in the Puget Sound Region, 2014 Community Checkup Overview

Naturopathic physicians (NDs) are formally “Primary Care” in 50% of 18 states with licensing – with DEA#s etc. in a subset.
Integrative pain treatment

- See Ford, BCBS Tenn., WA data plus VA integrative pain leads to 50% reduction in high use opioids
- U.S. Veteran’s Health Administration. VA Initiative Shows Early Promise in Reducing Use of Opioids for Chronic Pain, media release, February 25, 2015

Chronic disease

- See Ornish, Herman, Seely, above

Patient self-efficacy


Karen Milgate, MPP
Former Deputy Director, CMS; Advisory Team, PIHTA

www.optimalintegration.org
A Perspective from the Military
Use of “CAM” in the US Military

- 121 facilities (21 outside the US)
- 275 programs
- 213,515 visits (calendar year 2012)
- Number of facilities with various types:
  - chiropractic (59)
  - acupuncture (83)
  - massage (9)
  - yoga (11)
  - clinical nutritional therapy (68)
  - naturopathic medicine (1)
  - breath therapies
  - biofeedback (13)
  - meditation (14).
- Most visits for chiropractic and acupuncture


Lt. Gen. (Ret) Eric Schoomaker
Former Army Surgeon General:
Championed the exploration
Why?
Mayo: From “Producing Health Care” to “Creating Health”

"We are realizing fairly quickly that we need to change the focus of the health care industry to creating health, not just producing health care."

Douglas Wood, MD
Director, Strategy and Policy
Mayo Clinic Center for Innovation

American Hospital Association's *Hospitals and Health Networks*, April 2013
http://www.hhnmag.com/display/HHN-news-article.dhtml?dcrPath=/templatedata/HF_Common/NewsArticle/data/HHN/Magazine/2013/Apr/0413HHN_FEA_PatientexperienceGate
"From Sick Care to Health Care"

“We have been honed to focus on sick care ... It is a tough transition, but we have to learn how to move from sick care to health care.

"I'm not sure that any of us ... fully understands or knows the recipe."

Jonathan Perlin, MD, PhD
Chair-Elect, AHA
CMO, HCA

American Hospital Association®
Berwick: “Radical Shift” Toward “Creating Health”

“It is fortunately commonplace now to say that we would be better off to re-direct some of our health care enterprise from fighting illness ... to health creation."

"The pursuit of health, the creation of health, may require ... a redesign that may be even more radical than we have imagined."

Plenary Panel, Institute for Health Improvement, December 2013
http://www.youtube.com/watch?v=r5Tbikk44jY

Also: “Hooking Up: Don Berwick, Integrative Medicine and His Call for a Radical Shift to 'Health Creation’”
http://www.huffingtonpost.com/john-weeks/don-berwick-integrative-m_b_4781105.html
Design Principles for Healthcare Renewal (2001)
As developed by a multidisciplinary integrative health and medicine group

#9 (in part):
"The renewed healthcare system is a partnership between an expanded commitment to the public health and a thriving industry of health creation."

Clement Bezold, PhD
Moderated work of multidisciplinary integrative group, begun in Rayburn House Office Building

http://theintegratorblog.com/index.php?option=com_content&task=view&id=798&Itemid=93
Two Useful ACCAHC Resources for Engagement

On Meeting the Nation’s Primary Care Needs

"This is the best compendium of thoughtful analysis and information on these disciplines that exists. I admire the scholarship of this document."

Richard “Buz” Cooper, MD, Healthcare Workforce Expert
John Weeks  
jweeks@accahc.org
Jennifer Olejownik, PhD, Project Manager, PIHTA  
jolejownik@accahc.org

www.optimalintegration.org
www.accahc.org

Thank-you!