

Acupuncture: treatment effectiveness, authorization, and payment.

All national and state medical treatment guidelines support the use of acupuncture for various diagnoses. Below is literature that supports this fact! At times, however, insurance companies refuse authorization for treatment and will not pay for it, and a few insurance companies refuse to pay for any acupuncture treatments. The reasons for denial are in conflict with ALL National and State medical treatment guidelines. The denial of authorization and subsequent payment for these services is an arbitrary and capricious ruling by insurance companies that will NOT stand up in court when based on current medical science and the current literature.

Cut and Pasted from: Online Edition: State of Colorado, Department of Labor and Employment, Medical Treatment Guidelines, Chronic Pain Disorder, Revised.

Acupuncture. Acupuncture is an accepted and widely used procedure for the relief of pain and inflammation and there are some scientific evidences to support its use. Acupuncture is commonly used as an alternative in addition to traditional Western pharmaceuticals. It is commonly used when pain medication is reduced or not tolerated. It may be used as an adjunct to physical rehabilitation, surgical intervention, or as part of a multidisciplinary treatment to hasten return to functional activity.

1. Time to produce effect three to six treatments.
2. Frequency one to three times per week.
3. Optimum duration one to two months.
4. Maximum duration 14 treatments.

Any of the above acupuncture treatments may extend longer if objective functional gains can be documented and when symptomatic benefits facilitate progression in the patient's treatment program. Treatment beyond 15 treatments must be documented with respect to need and the ability to facilitate positive symptomatic and functional gains. Such care should be re-evaluated and documented with each series of treatments. All treatments should be accompanied by active therapy.

From the literature:

1. Arch Intern Med. 2012 Oct 22. Acupuncture for chronic pain: individual patient data meta-analysis. A systematic review to identify randomized controlled trials (RCTs) of acupuncture for chronic pain. Individual patient data meta-analyses were conducted using data from 29 of 31 eligible RCTs, with a total of 17,922 patients analyzed.

RESULTS: In the primary analysis, including all eligible RCTs, acupuncture was superior to both sham and no-acupuncture control for each pain condition. Patients receiving acupuncture had less pain for back and neck pain, osteoarthritis, and chronic headache.

CONCLUSIONS: Acupuncture is effective for the treatment of chronic pain and is therefore a reasonable referral option.

2. ODG national guidelines, frequently used by the US National Clearinghouse guidelines and many insurance companies. It notes there is scientific evidence to support acupuncture treatments, 8-12 visits over 4-8 weeks, and further treatment is acceptable if there are functional gains.

3. Effectiveness of Acupuncture for Low Back Pain: A Systematic Review

Spine. 2008;33(23):E887-E900. A systematic review of Twenty-three trials randomized controlled trials (RCTs). Objective. To explore the evidence for the effectiveness of acupuncture for nonspecific low back pain (LBP).

Conclusion. Acupuncture versus no treatment, and as an adjunct to conventional care, should be advocated in the European Guidelines for the treatment of chronic LBP.

4. Cochrane Review Summary for Cancer Nursing: Acupuncture-point Stimulation for Chemotherapy-induced Nausea or Vomiting
Cancer Nurs. 2010;33(6):479-480.

Conclusions

This review demonstrated some beneficial effects of acupuncture-point stimulation on chemotherapy-induced acute nausea and vomiting in adult cancer patients with the antiemetic regimen recommended by the American Society of Clinical Oncology.

5. National Guideline Clearinghouse, <http://www.guideline.gov/index.aspx>

Management of chronic pain. A national clinical guideline.

Complementary Therapies. Acupuncture should be considered for short term relief of pain in patients with chronic low back pain or osteoarthritis.

(This is Rated as Grade of Recommendation "A".)

Aetna Ins. Co guidelines online: aetna.com

Clinical Policy Bulletin: Acupuncture, Number: 0135

Aetna considers needle acupuncture (manual or electroacupuncture) medically necessary for any of the following indications:

- Chronic low back pain;
- Migraine headache;
- Nausea of pregnancy;
- Pain from osteoarthritis of the knee or hip (adjunctive therapy);
- Post-operative and chemotherapy-induced nausea and vomiting;
- Post-operative dental pain;
- Temporomandibular disorders (TMD).

Maintenance treatment, where the member's symptoms are neither regressing or improving, is considered not medically necessary. If no clinical benefit is appreciated after four weeks of acupuncture, then the treatment plan should be reevaluated.

6. In 2011 an overview of high-quality Cochrane reviews suggests that acupuncture is effective for some but not all kinds of pain. In 2014 Miller's Anesthesia book, "when compared with placebo, acupuncture treatment has proven efficacy for relieving pain".

In summary:

-The literature does support the use of acupuncture for many chronic pain syndromes. The accepted definition of chronic pain is: pain that has lasted longer than 3 months OR pain that has lasted longer than expected for the specific diagnosis.

-The medical literature is certainly not 100% in agreement on the effectiveness of acupuncture. This is the same for a number of other medical procedures. For example, spinal injections are very expensive, almost always approved at a cost of \$2500-10,000/visit, depending on which injections and how many were performed (and then a series of visits may occur, each costing the same). The literature states that these injections have a 30-40% effective rate. Yet acupuncture is sometimes denied (or not even ordered by many MDs) with similar rate of effectiveness at 30-40%, and with a cost of only \$400-600 for a trial. And a full treatment cost (done when the trial helps) is <\$2000. If I were an insurance company, I would always require a

trial of acupuncture (4-6 visits) first, which makes a lot of sense, as it would save a lot of \$ in the long run. Insurance companies may have restrictive rules on acupuncture which are supported by some literature, but certainly not all, especially considering there is significant support in ALL national and state medical treatment guidelines, as noted above in State of CO, ODG, and National Guideline clearinghouse sponsored by the US Govt. Multiple systematic reviews are supportive of most acupuncture treatments, and most reviews that are not supportive have parts of their review that do support some acupuncture.

-Note that in my personal and professional experience, acupuncture is very effective in at least 30-40% of patients, and should be tried fairly early in a treatment program when there is not significant improvement with other treatments as meds, PT, chiro, non-spinal injections, etc. In my opinion, it should always be recommended as a trial before spinal injections and surgery. I recommend a trial of 4-6 visits, as with other treatments, one cannot tell who will be helped. If no help after 4-6 visits, then stop. If helpful, a full treatment regimen of 6-14 visits is reasonable and very effective. Personally, I get great results for my neck, back, and nerve pain (and my allergies) in 3-4 sessions.

Finally, the decision by some insurance companies to deny authorization and payment for acupuncture is not medically reasonable, and not based in current medical science, and needs to be reversed and corrected. If you file a claim for acupuncture and it is denied by the insurance company, the denial of the request for treatment and subsequent payment is unreasonable and not supported by the medical literature. I recommend that you respond to the insurance company that you hope this does not require a lawsuit, as they have only a weak basis for their decision based on medical science, and their expenses to defend their claim will be significant, and they will almost certainly lose in court. Then you should request an immediate reply and authorization/payment of the claim.