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## **Survey Results Indicate Coverage of Ohio's Largest Healthcare Payers Continues to Favor Opioids Over Non-Pharmacologic Treatments**

**(Columbus, OH)** The Ohio State Chiropractic Association (OSCA) surveyed chiropractic physicians actively practicing in Ohio about coverage provided by Ohio's largest private and public payers – Medical Mutual, Anthem Blue Cross Blue Shield, Aetna, United Healthcare, Medicare, Medicaid, Workers' Compensation and the Veterans Administration. The survey results suggest that Ohio DCs feel the largest healthcare payers in Ohio continue to fall short on improving access and coverage for conservative care options that are recommended in several recent guidelines specific to treating acute and chronic pain. A summary of the findings is below.

### **Medicaid and Medicare**

From the perspective of providers across the state of Ohio, Medicaid and Medicare ranked 1<sup>st</sup> and 3<sup>rd</sup> worst on opioid and pain treatment guidelines.

In spite of participation by several Ohio Medicaid Managed Care plans on Ohio Attorney General Mike DeWine's Insurer Task Force on Opioid Reduction, their coverage continues to severely restrict services provided by a chiropractic physician. "The goal of the task force was to study and identify strategic actions that insurers can take to address opioid abuse." They were also "...asked to identify policy, legislative or regulatory barriers that have hindered their ability to combat the crisis." In June 2018, the task force released its Report and Recommendations. The first Recommendation in the report, which focused on prevention, states:

Recommendation 1: Insurers should cover and encourage, where appropriate, the use of both nonopioid pain medications and nonpharmacological treatments for pain. Recommended treatments included chiropractic services, acupuncture, massage.

The recommendation goes on to acknowledge that "providing coverage for these services may require a reprioritization or reallocation of current health care spending away from opioids and toward alternative therapies." And, insurers should examine their reimbursement models- which often bundle payment for services - to ensure they are not disincentivizing nonopioid therapies".

A report released by the Ohio Auditor of State in June 2018, cites a 262% increase in the rate of Medicaid members with opioid related diagnosis, which is five times greater for the Medicaid members compared to the commercially-insured population. However, Ohio Medicaid (and Medicare) continues to restrict coverage of services provided by a chiropractic physician including the initial examination and evaluation (E/M), as well as many active and passive treatment therapies that are recommended in the current guidelines for nonopioid treatment of pain.



## **Private Insurers**

Survey results indicate providers are seeing a similar pattern regarding private insurers.

Although many private insurers provide coverage for conservative care like chiropractic, due to high copays and deductibles, it is often times more expensive for the patient to choose conservative care. This is interesting since research shows that conservative care provides favorable outcomes with a lower cost to the insurance company. Until payers change their contracts and policies to bridge the gap between the recommendations in the guidelines and making the conservative care in those guidelines more financially accessible to their insured, the current plans offered appear to continue to perpetuate the very problem that we are trying to fix.

## **Ohio Bureau of Workers Compensation**

Although a recent report from Ohio BWC shows a reduction in the number of new opioid prescriptions, a large number of workers injured in Ohio are dealing with opioid related diagnoses including dependence, abuse, and overdose. There is room for improvement in increasing both awareness and access to conservative care for Ohio's workers. Not only could this help to further reduce opioid prescription rates, research shows initiating conservative care sooner in the treatment process can improve outcomes, helping to reduce the number of cases transitioning from acute to chronic conditions.

OSCA Opioid Task Force Co-Chairman Pat Ensminger, DC, concludes, "State and national opioid and pain treatment guidelines recommend chiropractic and non-pharmacologic treatments as first-line options for pain to prevent opioid abuse and addiction." Dr. Ensminger continues, "Based on the clinical experience of physicians providing these treatment options, Ohio's largest healthcare payers currently provide poor coverage for chiropractic and non-pharmacologic treatments. Survey results indicate Ohio's healthcare payers continue to favor opioid treatment for non-terminal pain, and are contributing to the ongoing opioid epidemic in Ohio."

OSCA's Executive Director, Nicholas Strata, said "the OSCA began drafting a bill in May that would address the Medicaid access issue." Additionally, he added "we are also working on a bill that would ensure patients across Ohio who are in commercial insurance plans have the ability to seek non-pharmacological care."

More detailed information and recommendations are available in the Opioid Taskforce Resources tab on the OSCA website: [www.oscachiro.org](http://www.oscachiro.org).

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