The Joint Commission has mandated that hospitals provide or educate patients on non-pharmacologic pain treatment options including acupuncture, chiropractic care and massage therapy. While these non-drug options have often been seen as a complementary approach that can potentially reduce the need for opioid medications, more and more health care organizations are recognizing that in order to mitigate the opioid epidemic, non-drug therapies should be used as first-line treatments for pain management. An integrative health approach, which may include behavioral health interventions, acupuncture, chiropractic, and group medical visits, provides innovative ways to prevent opioid addictions and treat chronic pain, as well as enhance access to treatment in underserved settings.

Nearly 12 million people misuse opioids across the United States. In 2015 over 33,000 people died from opioid overdoses.
- People living in poverty are especially at risk for addiction and its consequences.
- The estimated cost of the opioid epidemic is over $500 billion.

Adverse Childhood Experiences (ACEs) lead individuals to be at much higher risk of developing a substance abuse disorder or chronic pain.
- Those with chronic pain are more likely to get prescription opioids to address their symptoms.

Integrative health strategies such as acupuncture, behavioral health, chiropractic, massage therapy, and yoga have been proven to be more effective and safer than opioids to treat chronic pain, and are thus considered first-line therapies by multiple national organizations.
- These approaches have been shown to be cost-effective, in one study reducing costs by 4% in hospitalized patients with pain.
- For more information on integrative health approaches, consider joining the Congressional Integrative Health and Wellness Caucus
  - Contact Kallie Guimond at kguimond@ihpc.org or call the office of Congressman Jared Polis at 202-225-2161

Group Visits are an emerging value-based strategy which have shown efficacy and cost-savings for chronic pain and opioid disorder.
- You can download the Children’s Book that the Suboxone Group at Greater Lawrence Family Health Center wrote here: http://massclearinghouse.ehs.state.ma.us/ALCH/SA3556.html
Federally Qualified Health Centers (FQHCs) are the largest primary care provider of underserved communities serving over 26 million patients in over 11,000 rural and urban communities nationwide.

- They offer primary care, dental, and mental health services to all regardless of their ability to pay.
- To learn more about FQHCs, go to www.NACHC.org

Strategies that have proven effective in underserved settings involve:
- Trauma-informed mental health services
- Group Medical Visits
- An evidenced-based integrative health approach (e.g. acupuncture, chiropractic, yoga, etc.)
- Medication Assisted Treatment

Barriers in Underserved Settings
- Lack of access to mental health services
- Most insurances do not cover many of these integrative health services or practitioners
- FQHC rules limit who can be considered a billable practitioner
- Guidance for billing of group visits, especially in FQHCs, is unclear

THE NEED

- We advocate that:
  - All forms of health insurance, including public insurances like Medicaid and Medicare, should prioritize and incentivize evidenced-based, non-drug treatments and practitioners for chronic pain and opioid misuse, including:
    - integrative health services
    - group visits
    - trauma-informed behavioral health treatment and prevention programs
  - FQHC rules should be adapted to accommodate these approaches.
  - Programs and policies should be developed to address and prevent Adverse Childhood Experiences.

To learn more about Integrative Medicine for the Underserved (IM4US), visit www.im4us.org, or contact us at info@im4us.org.