Oregon Medicaid’s Innovative Approach to Back Pain

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Oregon’s Back Pain Coverage Paradigm

Cognitive behavioral therapy
Spinal manipulation
Acupuncture
PT/OT
Non-opioid medications

If available:
Yoga
Interdisciplinary rehab
Supervised exercise
Massage therapy

Opioids (acute and chronic)
Epidural steroid injections & other injections
TENS
Back surgeries
Guideline Note 56: New Treatment Pathways

Low Risk
- Office visits
- OTC meds, muscle relaxers

4 visits
PT/OT/OMT/
Chiro/Acupuncture/
Massage

High Risk
- Office visits
- Cognitive Behavior Therapy

Up to 30 visits
PT/OT/OMT/
Chiro/Acupuncture

OTC meds, muscle relaxers
Limited opioids

If available:
Yoga, interdisciplinary rehab, supervised exercise, massage

Risk Stratification (STarT Back)

Not Recommended:
1st line Opioid prescribing or Long Term Opioid use
Challenges to coverage decisions for nonpharmacologic therapies

- **$ (Cost, Reimbursement)**
- **Workforce (Licensing/credentialing, Rural availability)**
- **Education/Cultural shift (Providers, Patients, Plan medical directors)**
- **Implementation (Difficulty with requirements, Opioid tapering)**
Evidence needs?

**Critical outcomes**
- Long-term function
- Opioid use
- Inappropriate utilization (ED)
- Return to work

**Dose-response**
- Duration
- Intensity

**Payer policies**
- Improvement in critical outcomes
- Reduction in opioids
- Cost impacts