Naprapathy April 19, 2013

- In compliance with ACCME/NMMS Standards for Commercial Support of CME
  John D. Blum has asked to advise the audience that he has no financial relationships to disclose
The Naprapath
in the Rainforest

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Naprapathy

- Naprapathic Medicine is a specialized system of health care that employs hands-on manual medicine, nutritional counseling and a wide variety of therapeutic modalities. Naprapathy focuses on conditions caused by contracted, injured, spasmed, bruised, and/or otherwise impaired myofascial and connective tissue.
Swedish Take

- Naprapathy is defined as a system of specific examination, diagnostics, manual treatment and rehabilitation of pain and dysfunction in the neuromusculoskeletal system. The therapy is aimed at restoring function through treatment of the connective tissue, muscle- and neural tissues within or surrounding the spine and other joints.
Licensed in Two States

New Mexico Naprapathic Practice Act
- 61-12F-1

Illinois Naprapathic Practice Act
- 215 ILCS 63
Naprapathy and the ACA?
Affordable Care Act, Stormy Waters
The Even Bigger Picture
Interrelated Challenges

- System Redesign
- Cost Containment
- Revenue Generation
- Human Resource Expansion
- Meaningful Insurance Coverage
- Affordability
ACA in the Eye of the Storm
IOM Winnable Battles
Persistent Intractable Pain
A Long Standing Search

- Acupuncture for Chronic Low Back Pain


Opioid Addiction

- The problem with pain meds

- Prescription opioid painkillers are now the leading cause of drug overdose deaths in America, taking more lives than heroin and cocaine combined. To better control the flow of pain drugs, an advisory panel to the Food and Drug Administration in January recommended tighter restrictions on a group of popular pain medications that includes Vicodin and Lortab, meds that contain hydrocodone and acetaminophen. They would be placed in the most highly regulated drug category, which now includes oxycodone pain meds such as OxyContin and Percocet, along with morphine and opium. Pills in this category are much harder to obtain, with each refill requiring a new prescription.

- AARP Bulletin April 2013
Making a Case for Naprapathy

- On the Face of the Law
- Community Health Teams Section 3502
- Healthcare Workforce Taskforce Section 5101
- Non-Discrimination Provision Section 2706
2706

- Not An Any Willing Provider Provision
- Impacts on Non–Public Plans Broad
- Reference to Minimum Essential Benefits
- DHHS to Enforce in Multi-State Plans
- American Medical Association Board of Trustees in Opposition
A Four Part Conventional Case

- Licensure
- Insurance Coverage
- Clinical Efficacy Studies
- Patient Satisfaction – PCORI, Value Based Purchasing
ACA Hallmark: Innovation

- Center for Medicare and Medicaid Innovations
- 41 Demonstration Models 1115(a)
- Biomedical Innovations Key
Healthcare Rainforest
A Structure of Innovation

The Rainforest: The Secret to Building the Next Silicon Valley

Victor Hwang, Greg Horowitt
A Case for Naprapathy

- Chronic Lower Back Pain
- Conservative and Recognized Modality
- Licensed Providers (Naprathapaths)
- Build into PCMHs
- Patient Centric
- Quality Based on Anecdotal Experience
- Cost Effective
- Bundled Payment
A Small Rainforest

- The ACA and Public Health Need Real Innovation
- System Transformation Requires Going Outside Biomedical Models