



Washington East Asian Medicine Association

September 26, 2017

Honorable Governor Jay Inslee
Office of the Governor
PO Box 40002
Olympia, WA 98504-0002

Re: Alternatives to Opioids for Omnibus Opioid Bill

Dear Governor Inslee:

The Washington East Asian Medicine Association (WEAMA) applauds your efforts to combat opioid addiction in Washington State. It has come to our attention that you will be preparing an Omnibus Opioid Bill for the 2018 legislative session to address opioid addiction in our state. WEAMA is requesting consideration for acupuncture to be included in the state's Medicaid program as a non-pharmacological alternative for our low-income citizens to prevent and combat opioid dependency.

The states of Oregon, Vermont, Minnesota and Ohio are offering or are considering acupuncture for pain management through their state's Medicaid programs. [[Ohio to open Medicaid to acupuncture](#)]. Vermont, for example, is seeking to address issues related to the opioid crisis, where legislators noted that nonpharmacologic treatments have been recognized as an important strategy in the management of pain. The efficacy of acupuncture for the treatment of many common chronic pain conditions has been well documented in numerous high-quality randomized controlled exploratory trials. The 2016 Vermont Legislature appropriated \$200,000 to fund a pilot study to assess acupuncture as an adjunct therapy for the treatment of chronic pain in the Vermont Medicaid population. [[Acupuncture for Chronic Pain in the Vermont Medicaid Population Progress Report for the Legislature](#)].

There is a tremendous amount of new research available on the effectiveness of acupuncture such as the 2017 White Paper on, "[Acupuncture's Role in Solving the Opioid Epidemic: Cost-Effectiveness and Care Availability for Acupuncture as a Primary, Non-Pharmacologic Method for Pain Management](#)". The cost of addiction and death associated with opioid abuse and dependence far outweigh the cost of adding non-opioid alternatives to our state's Medicaid program. Acupuncture is also cost effective for treating chemical dependency and weaning

patients off of their addictions. [[NADA Ear Acupuncture: An Adjunctive Therapy to Improve and Maintain Positive Outcomes in Substance Abuse Treatment](#)]

WEAMA was recently successful in working with Washington State Labor and Industries (L & I) to provide acupuncture treatments for injured workers through a pilot project that was the results of a literature review on low-back pain. This pilot project begins October 1, 2017 and will explore the use of acupuncture for the treatment of low-back pain. [[L & I Acupuncture Pilot Project](#)]

The Patient-Centered Outcomes Research Institute (PCORI) recently completed a research project which explores non-pharmacological alternatives for managing pain to help patients in low-income areas. What they discovered is that there is a health disparity for low-income patients having access to non-pharmacological alternatives like acupuncture. Low-income patients need options besides opioids to help reduce their pain. [[Chronic Pain Treatment without Opioids-PICORI](#)]

The Seattle Children's Hospital currently offer acupuncture treatments for children who do not respond well to pharmaceutical interventions. Acupuncture provides a non-pharmacological treatment with low incidence of side effects, which is considered safe for children. Although this program is successful there is no reimbursement mechanism for acupuncture treatments for low-income families unless the family has private insurance. Expanding Medicaid coverage to include acupuncture would create equal opportunities for care and treatment provided to all patients irrespective of their condition, disease or family's financial status.

We have also been in contact with the Washington State Health Care Authority about two recent grants and complementary activities supporting Washington's response to the opioid crisis. The first is the CURES act funding, which was just awarded to the state in the amount of \$11M. The second is a required project under the Medicaid Transformation Project that every Accountable Community of Health is required to pursue. [[Washington State Medicaid Transformation Project Section 1115\(a\) Medicaid Demonstration Approved January 9, 2017](#)]. We believe there are opportunities available to fund a pilot project, such as the one in Vermont or WA L & I, in the upcoming Omnibus Opioid Bill for the 2018 session. We would be happy to provide additional studies upon request and assist in any way possible to provide care to our most vulnerable populations, such as children and our low-income citizens who deserve non-pharmacological alternatives to pain management.

The National Association of Attorneys General sent a letter dated September 18, 2017, and signed by 35 State Attorney Generals (including District of Columbia and Puerto Rico) to Marilyn Tavenner, President /CEO of America's Health Insurance plans. The letter asks states to "take proactive steps to encourage members to review their payment and coverage policies and revise them as necessary to encourage health providers to prioritize non-opioid pain management options over opioid prescriptions for the treatment of chronic, non-cancer pain. Among the "effective non-opioid alternatives" are acupuncture, massage, physical therapy and chiropractic.

Washington State Attorney General, Bob Ferguson, did not sign onto this letter. We strongly encourage the participation of Attorney General Ferguson in supporting the use of effective non-opioid alternatives, such as acupuncture, massage, physical therapy and chiropractic in all health insurance programs in Washington State, including Medicaid. [[National Association of Attorneys General](#)]

WEAMA would like to partner with the Governor's Office, Department of Health, the Health Care Authority, Labor and Industries, Bree Collaborative, Washington State Attorney General and others to help prevent opioid addiction and chemical dependency by offering acupuncture and East Asian Medicine as an effective, evidence based treatment for pain and chemical addiction. With an Omnibus Opioid Bill under consideration, please consider funding non-opioid alternatives for Medicaid through a budget proviso, decision package, legislation or at the very least, a pilot project similar to those in other states or the WA State L & I Acupuncture Pilot Program.

Thank you for your consideration and the opportunity to provide comment and recommendations for the Governor's Omnibus Opioid Bill.

Sincerely,

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