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## What's CAM got to do with it?

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The current healthcare delivery system, which generates costs that comprise 17% of the gross domestic product, is well equipped to provide acute care and to conduct healthcare-related research and development. However, it is estimated that over seventy-five cents of each healthcare dollar spent goes to the treatment of chronic disease. This is precisely where the paths of conventional medicine and CAM meet. The premise of CAM – treating the patient as a whole – aligns perfectly with the management of chronic conditions and, when integrated with conventional

medicine, often produces results superior to conventional medicine alone.

Complementary and Alternative Medicine (CAM) is the category of healthcare predominantly provided by chiropractors, acupuncturists, naturopathic physicians, and massage therapists. Thirty-eight percent of Americans access CAM care at least once per year, resulting in an estimated \$34-billion annual spend. As these metrics continue to rise, it is apparent that the role of CAM in healthcare is increasing for individuals, as well as the integration of CAM within the conventional delivery system.

The roots of CAM reach back thousands of years; evidence of similar treatments and techniques can be found in vastly different areas of the world. It is truly “traditional medicine.” Today, CAM providers graduate from accredited colleges, are subject to state licensure and must meet continuing education requirements to ensure they have obtained the appropriate education and experience. The Pacific Northwest is an epicenter for provider education, with large colleges for all four primary disciplines and above-average use of CAM services.

Integration takes many forms and

happens frequently. Hospitals and specialty clinics have integrated CAM providers into their services. This increasing level of acceptance and formalized relationship makes the cross-referral process easier, allowing both the conventional and CAM provider the opportunity to collaborate using the same patient record keeping platform. On [www.mayoclinic.com](http://www.mayoclinic.com), an online health information application offered by The Mayo Clinic, a user can search a vast index of medical conditions. For each condition the tool offers 10 basic informational categories including definition, symptoms, treatment, and alternative medicine options. This inclusion of CAM information by one of the most influential and progressive conventional health organizations in the country is a meaningful step toward an integrated model.

Medical education institutions and health advocacy groups are also becoming more involved with CAM. The University of California, Los Angeles (UCLA) School of Medicine reported their findings that patients who had an acupuncture treatment immediately prior to their chemotherapy session experienced a significant reduction in vomiting and nausea. The American Cancer Society (ACS) suggests acupuncture as well, stat-

ing “clinical studies have found it may help treat nausea caused by chemotherapy drugs and surgical anesthesia.” Pop culture is even getting in on the act: a dramatized clinic-based form of this integration can be seen each week on ABC’s *Private Practice*, which is a spinoff of the popular hospital-based drama *Grey’s Anatomy*.

In the new healthcare climate, where individuals are becoming reacquainted with the true cost of care through increasing cost shifting or loss of coverage, CAM is enjoying a surge of new patients who are interested in more affordable, less invasive care. Health plans in the Northwest have added greater access to CAM providers through built-in benefits or additional benefit riders over the past decade. In order to ensure positive interactions for the membership through targeted partnership with the top providers, a larger panel is not always the answer. Due to the wide spectrum of available providers, it is common for health plans to partner with a third party company spe-

cializing in CAM to manage their network credentialing, utilization review, and claims payment.

Evidence—the new universal language of healthcare—does not foster a preference between conventional and CAM treatment. Although CAM has a rich history, empirical efficacy data and outcomes research on par with conventional medicine is only recently emerging. The Cochrane Collaboration ([www.cochrane.org](http://www.cochrane.org)), is an outstanding source for information on the effects of healthcare. A non-profit organization founded in 1993, the site is designed to help individuals and providers make evidence-based decisions. Their Library of Systematic Reviews offers a combination of conventional and CAM treatments. Another excellent source of credible information on CAM can be found on the website of the National Center for Complementary and Alternative Medicine (NCCAM): <http://nccam.nih.gov>. NCCAM is one of many public and private organizations focused on the creation

and promotion of CAM research and clinical studies. Increasing the quality of CAM evidence will promote further integration and support healthcare consumers and providers to include CAM as an addition to their spectrum of care.

*Finding himself in health insurance through no fault of his own, Mr. Phillippay has become an active contributor to healthcare publications and an advocate for incremental delivery system improvements. His sales and marketing background with a Northwest health plan connected him with the challenges facing individual and group purchasers of health insurance. His responsibilities have included product development, technology integration, provider contracting, and regulatory adherence. In December of 2009 he accepted a position with The CHP Group ([www.chpgroup.com](http://www.chpgroup.com)). He is the incoming president of the Oregon chapter of the National Association of Health Underwriters. He can be reached at [tphillippay@chpgroup.com](mailto:tphillippay@chpgroup.com).*

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