


DRAFT – For Consideration

| | | |
|-------------------------|---|--|
| Proposal Title | Acupuncture Services (R009c) |  |
| Health Plan Affected | Retiree Health Plan | |
| Proposed Effective Date | January 1, 2025 | |
| Reviewed By | Retiree Health Plan Advisory Board | |
| Review Date | 4/25/2024, 5/9/2024, 5/30/2024, 6/21/2024 | |

1) Background

The AlaskaCare Retiree Plan (Plan) currently excludes coverage of acupuncture therapy, unless performed by an eligible physician as a form of anesthesia in connection with surgery. Members seeking acupuncture services currently pay out of pocket. Additionally, licensed acupuncturists are not covered providers under the terms of the Plan at this time.

In 2016 and 2017, Aetna updated its clinical policy bulletin (CPB) to state that acupuncture is considered medically necessary for treatment of specific conditions, including chronic neck pain, chronic headache, and back pain. In 2020, the Centers for Medicare & Medicaid Services (CMS) issued a National Coverage Determination stating that Medicare would cover acupuncture for patients with chronic low back pain, as part of an effort to support alternative, non-opioid pain therapies.

2) Objectives

- a) Provide an additional treatment option for members as a complement to other health strategies.
- b) Update the plan as evidence-based medical science evolves.
- c) Cover safe, low-cost, and evidence-based approaches to pain care.

3) Summary of Proposed Changes and Analysis

This proposal contemplates adding coverage of acupuncture for medically necessary indications in alignment with Medicare and the medical Third-Party Administrator’s (Aetna) current CPB. This would include the addition of licensed acupuncturists to the list of covered providers under the terms of the Plan.

The Plan would provide coverage up to 10 visits per year for the following medically necessary indications in accordance with an ongoing and written plan of care, when administered by a recognized health care provider practicing within the scope of his/her license: Chronic (minimum 12 weeks duration) neck pain; Chronic (minimum 12 weeks duration) headache; Low Back Pain; Nausea of pregnancy; Pain from osteoarthritis of the knee or hip (adjunctive therapy); Post-operative and chemotherapy-induced nausea and vomiting; Post-operative dental pain; Temporomandibular disorders (TMD).

Acupuncture should be provided in accordance with an ongoing, written plan of care. The treatment goals and subsequent documentation of treatment results should specifically demonstrate that acupuncture services are contributing to such improvement. Acupuncture is not a proven and accepted therapy for all conditions.

4) Actuarial and Financial Impacts

Implementation of this proposal is estimated to result in an actuarial increase of 0.07% to the Plan, and the financial impact is projected to be to approximately \$500,000 in additional annual costs, depending on the cost sharing provisions.