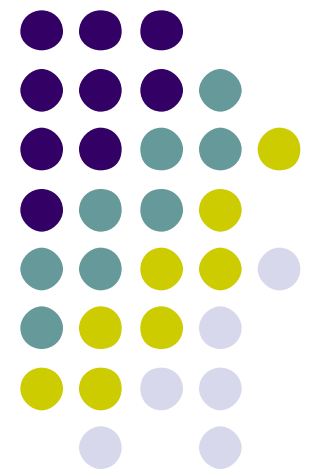


Medicaid Patient Characteristics at an Academic Chiropractic Clinic

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Background: Medicaid

- 1965: Title XIX Social Security Act
- Joint funding
- Considerable State flexibility
- Largest health care financier for America's poorest – low SES.

Background: Medicaid Income Eligibility and SES



Number in family	Monthly net income	Resources
1	\$700	\$4200
2	\$900	\$5400
3	\$1100	\$6600
4	\$1109	\$6650
5	\$1117	\$6700
6	\$1134	\$6800
7	\$1275	\$7650
8	\$1417	\$8500
Each add. Person	\$142	\$850

Background: Medicaid Spending

- Spending is up, but...
- Medicaid pays for 1.8% of chiropractic visits
 - Unchanged from 1998 (NBCE, 2005)
- New York: One of 17 states that provide no reimbursement for chiropractic

Background: Seneca County

- Seneca County is home to NYCC
- Seneca County Statistics:
 - Population: 33,342
 - 11.5% of population below poverty level
 - 4,326 Medicaid enrollees

Background: NYCC CHC



- Campus Health Center (CHC) policy
 - **No charge** for Medicaid patients
 - Treatment by 8th trimester students
- Clinic outreach to County



Background

- Little research **specifically** with Medicaid patients and chiropractic.
- Two studies approved by NYCC IRB
 - **Retrospective** (2004 - 2006)
 - Prospective (2007 - present)



Current Project

- OBJECTIVE: To review demographics of **all adult Medicaid patients** within an academic chiropractic clinic prior to January 1, 2007 (n=88).
- **50 variables** assessed per patient



Duration Definition

- For purposes of this presentation,
 - $CC > 12$ weeks = “chronic”
 - $16 \text{ days} < CC < 12$ weeks = “subacute”
 - $CC \leq 16$ days = “acute”

Basic Patient Demographics Included Patients (n=88)



	Mean	Upper 95% CI	Lower 95% CI
Age	37.7	40.5	34.9
Height (in)	66.5	67.4	65.7
Weight (lb)	195.3	208.0	182.6
BMI	30.9	32.8	29

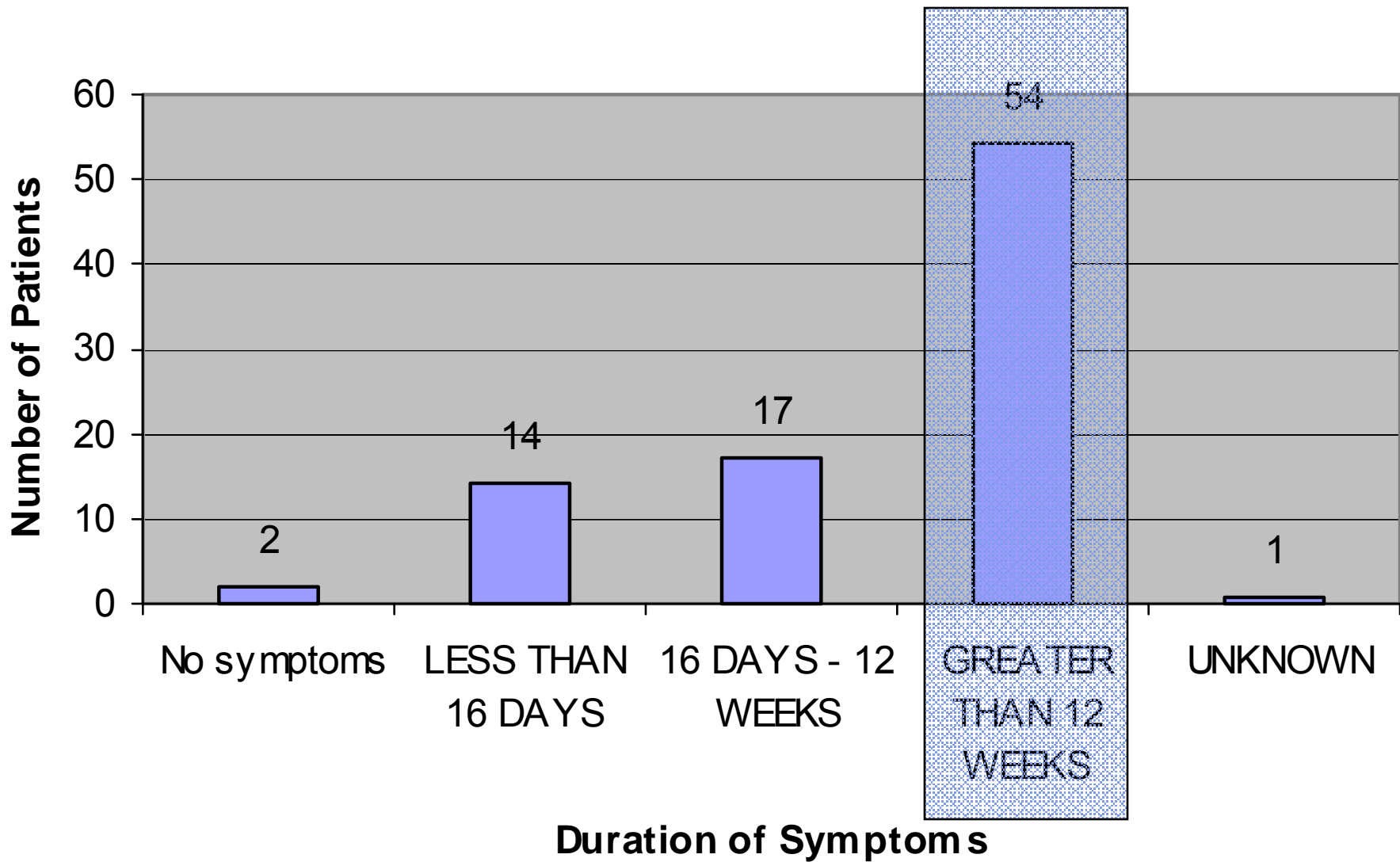
The average patient was obese (BMI of ≥ 30)

Basic Patient Demographics Included Patients (n=88)



- Sex
 - Male – 33 (38%)
 - Female – 55 (63%)
- Similar to NBCE (2005) national estimate

Duration of Symptoms

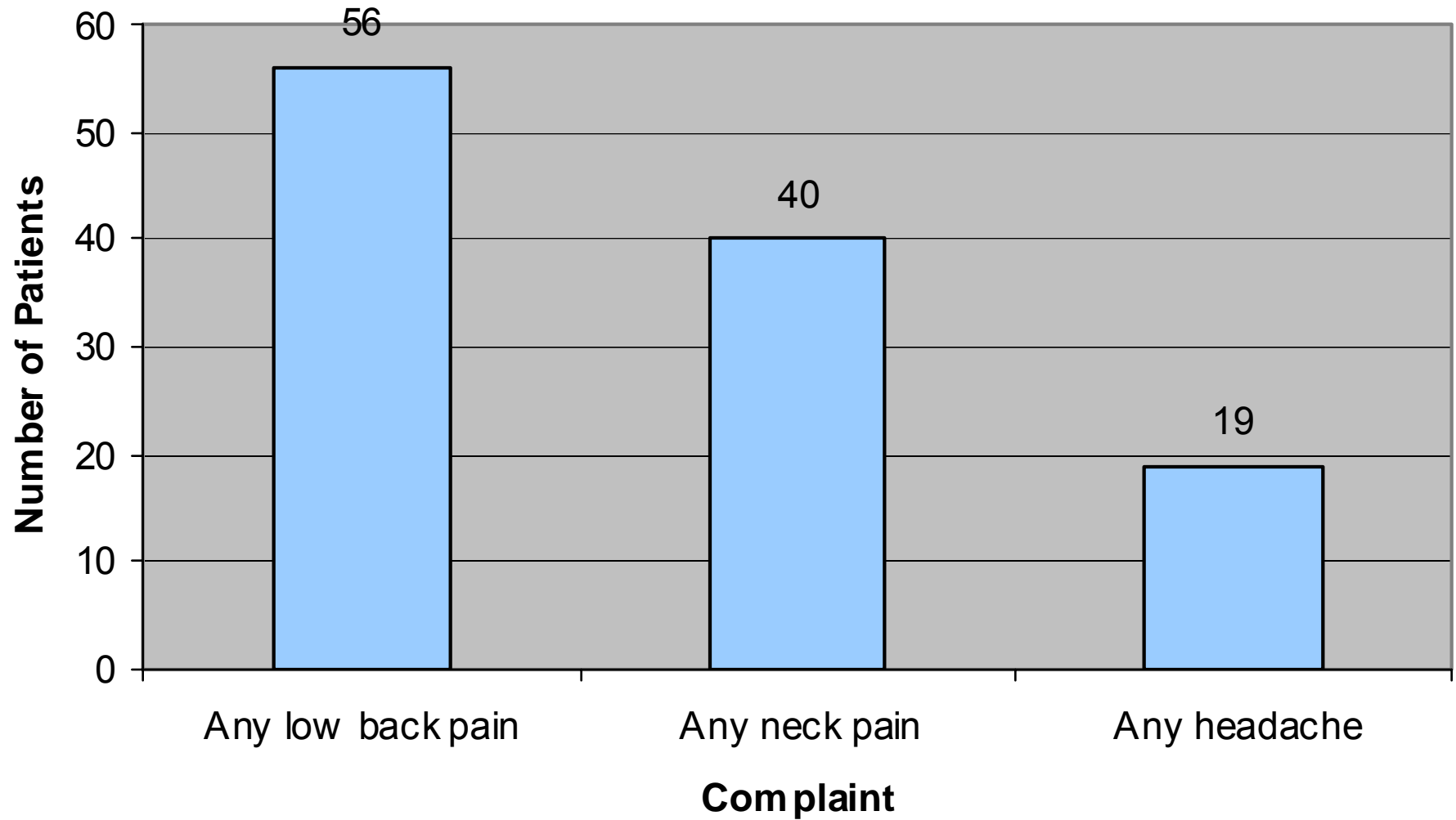




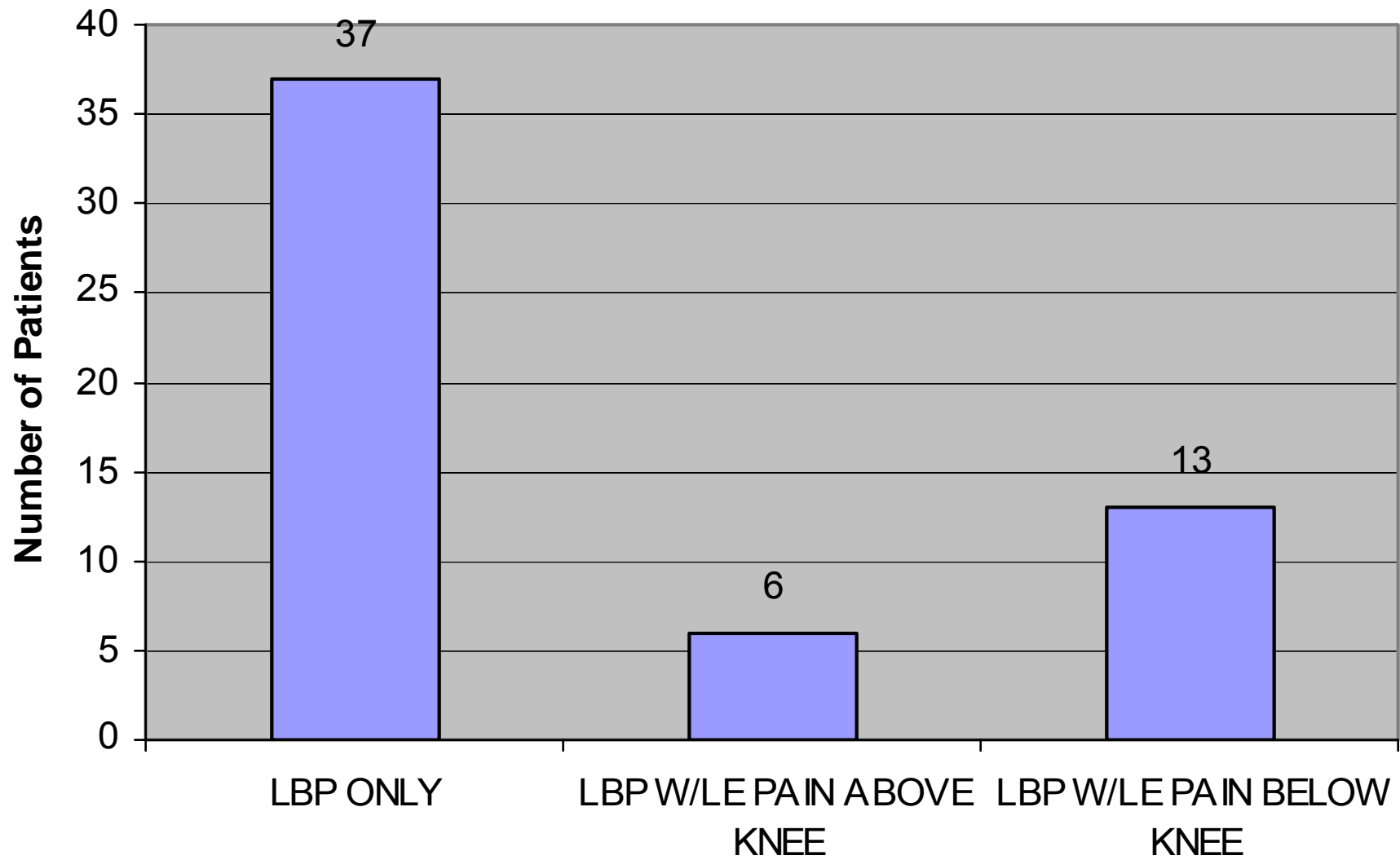
Chronic Pain

- Relationship between chronic pain and socioeconomic status.
- Cause or consequence or both?

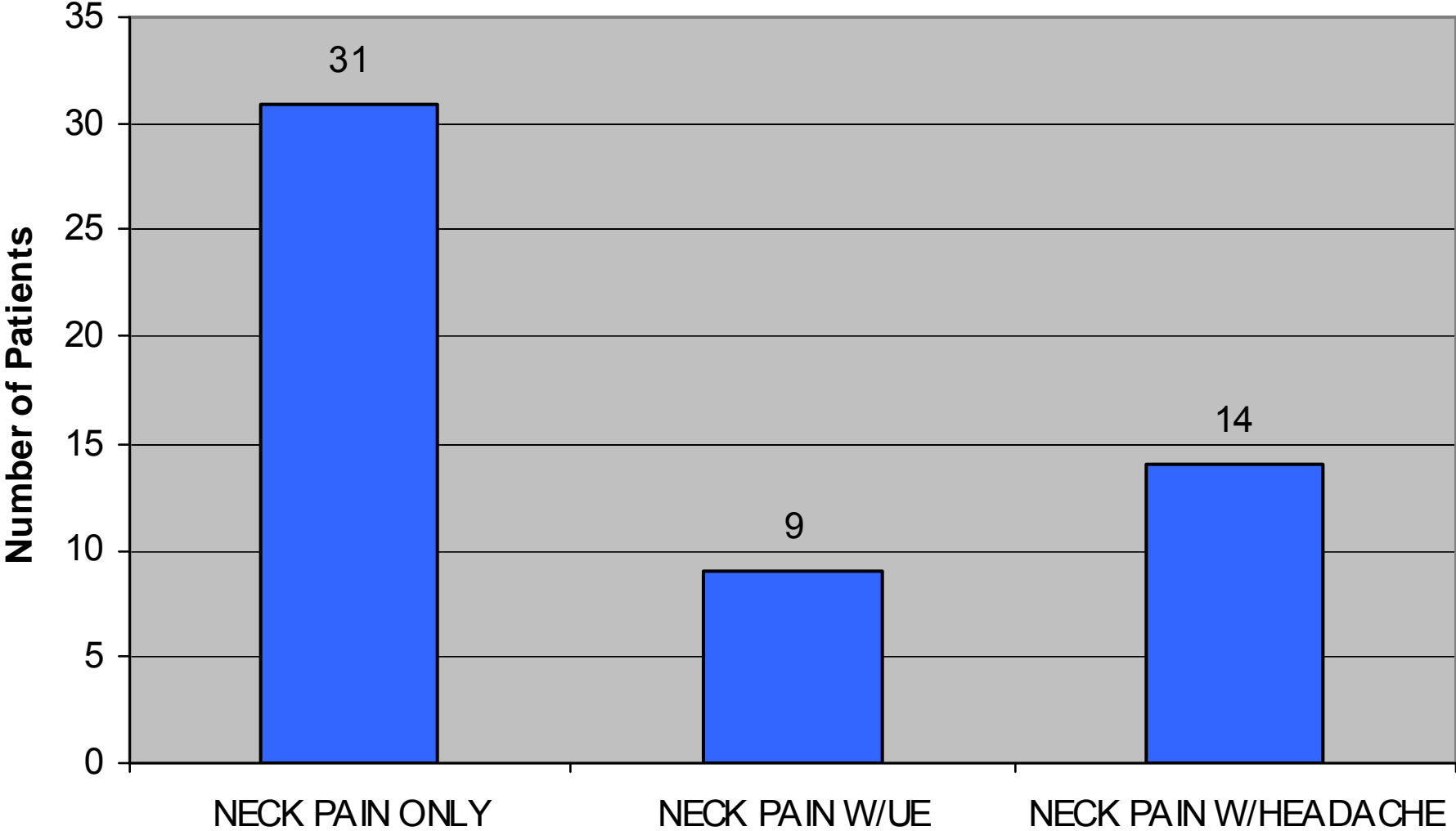
Location of Chief Complaints



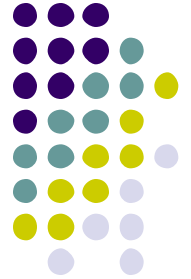
Low Back Pain CC



Neck Pain CC

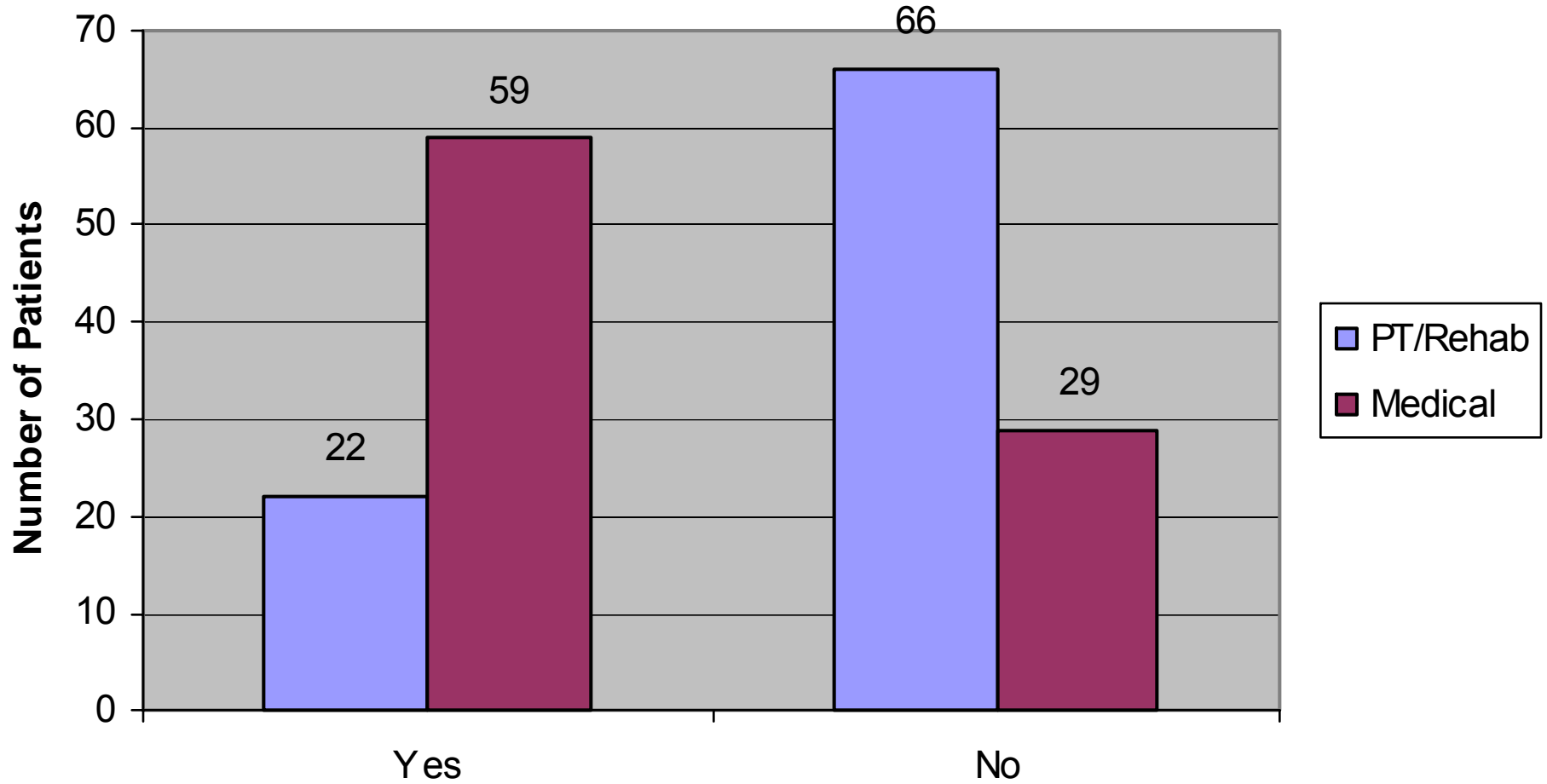


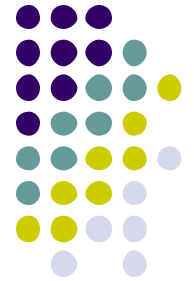
Comparison



	NBCE (2005) National Survey	Medicaid
Low back CC	23.6%	64%
Neck CC	18.7%	45%
Headache & facial CC	12.0%	22% (headache pain only)

Prior Treatment for CC





Pain at Intake

	Mean	Upper 95% CI	Lower 95% CI
Stated Pain at Intake	6.0	6.5	5.5
Drawn VAS at intake	60.1	65.2	56.2



Comorbidities

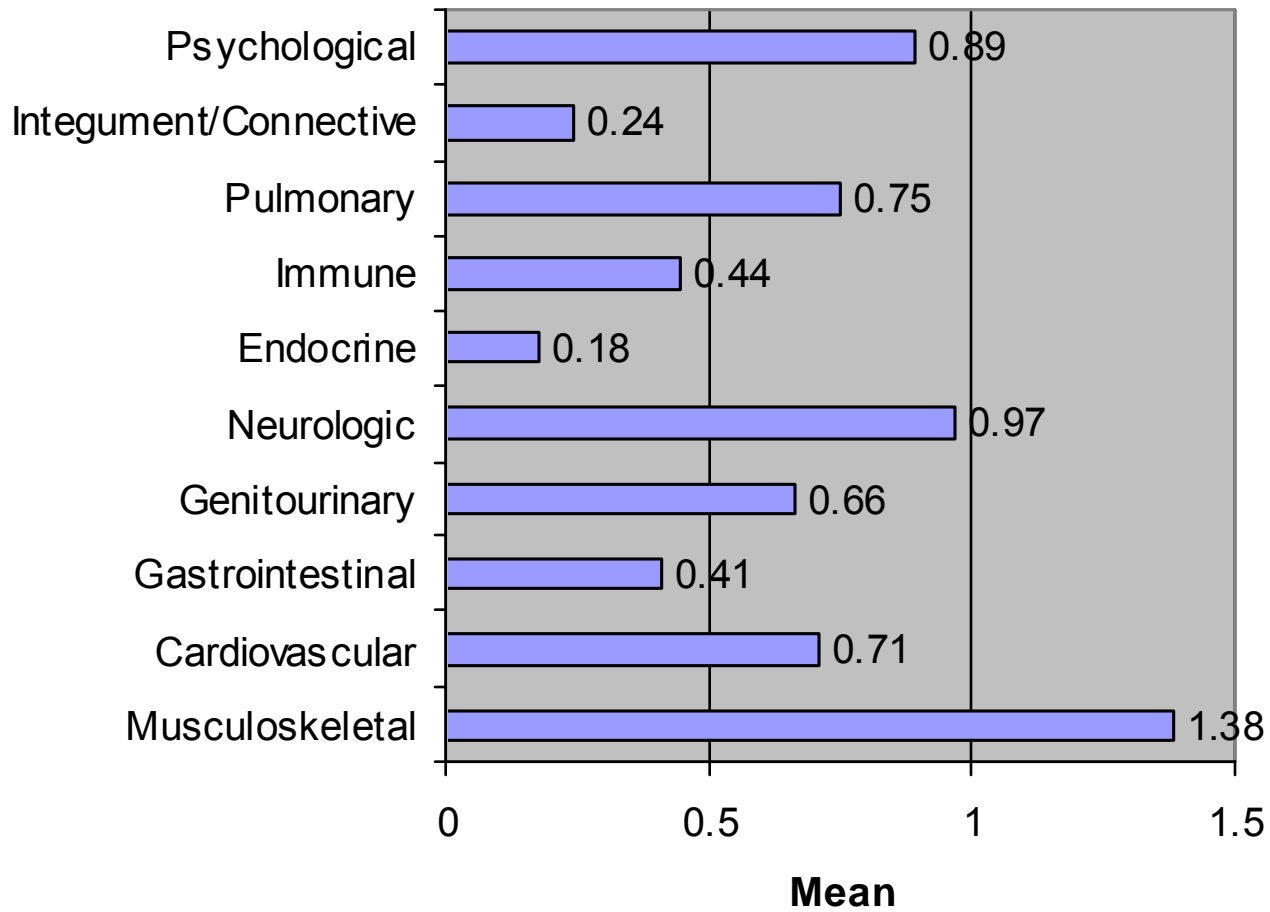
- 43% were smokers
 - Much higher than US overall:
 - 20.9% of adults smoke
 - 29.9% of adults in poverty smoke.
- 57% of acute patients smoked



Comorbidities

- 49% reported anxiety/depression
 - Much higher than US overall:
 - 17.7% of adults experience depression
 - 18.1% experience anxiety
- Actual medical diagnosis not known.
- Evenly distributed (common SES)

Patient Comorbidities



Comorbidities

Condition	# of Patients
Osteoporosis	7
Coumadin/Plavix	8

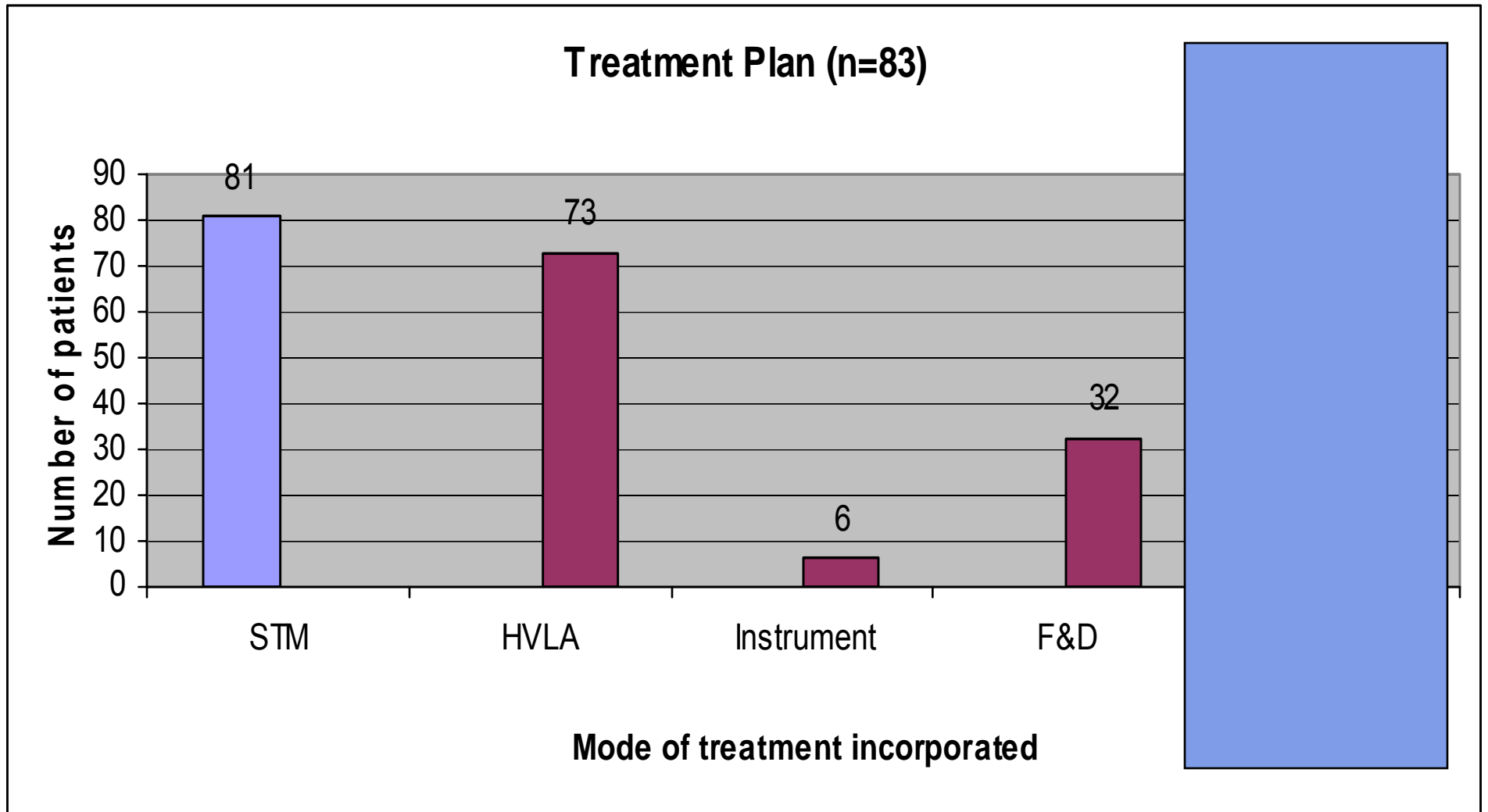
Adverse Events



- No serious adverse events reported under chiropractic management in this study.

- *Dougherty, P. and Egan, J. (2007). Patient characteristics at a VA outpatient clinic. Oral presentation at American Public Health Association Annual Meeting.*

Treatment



Patients Receiving Specific Treatments

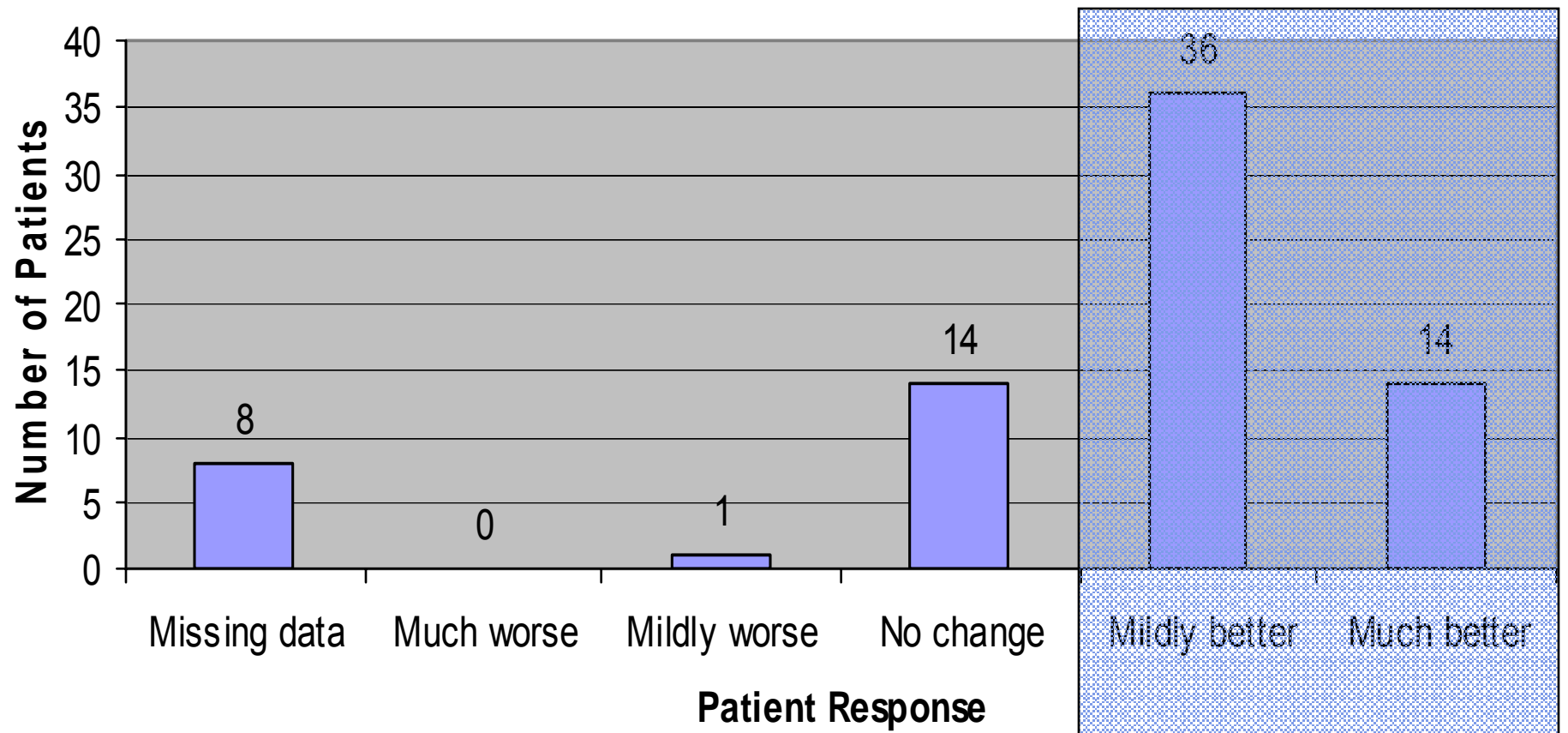
	NBCE (2005) National Survey	Medicaid
HVLA (diversified)	71.5%	88%
Cox / Flexion Distraction	23.5%	39%
Activator / Instrument Assisted	23.9%	7%

Response to Initial Treatment



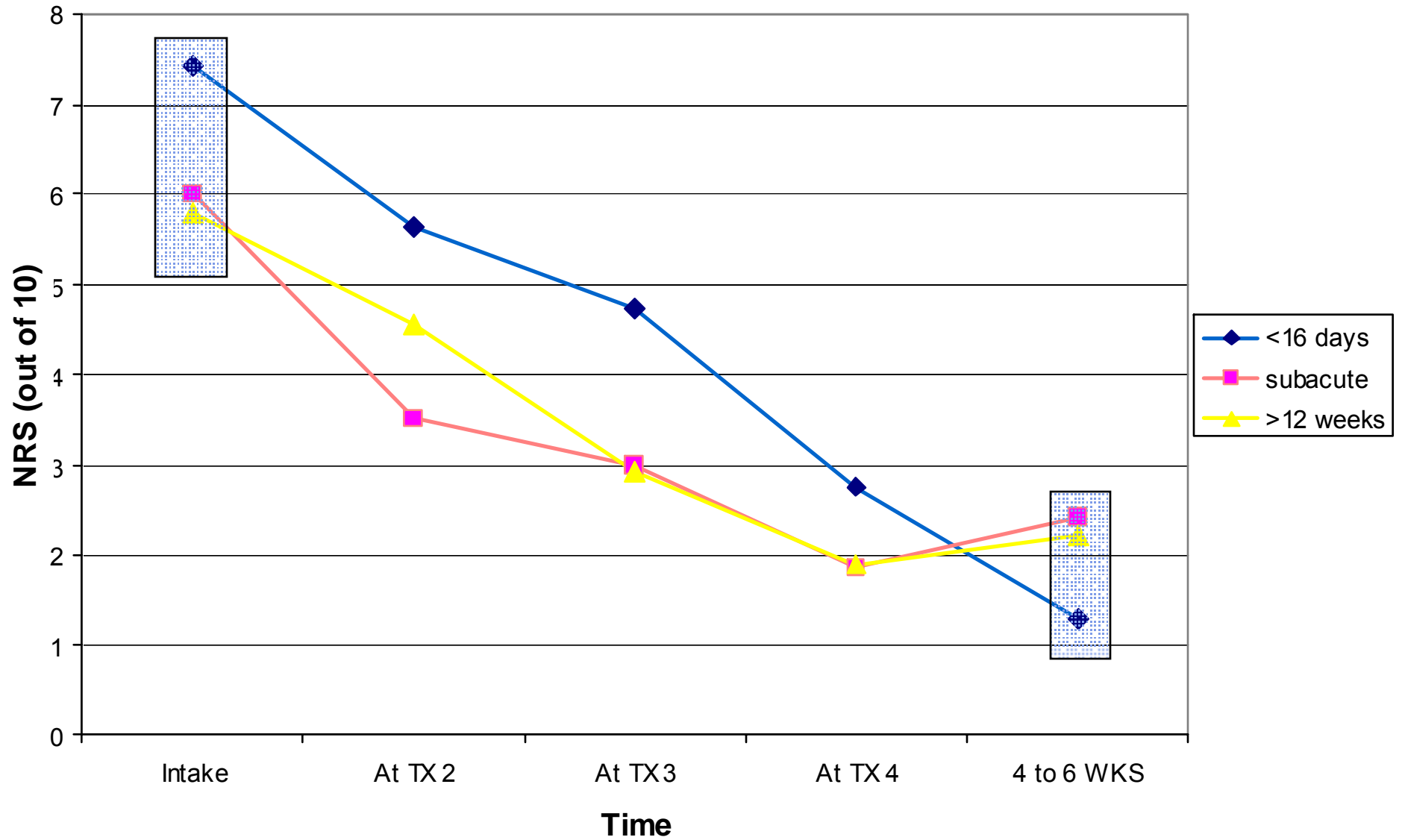
- **Soreness** following initial treatment?
 - YES: 16%
 - **NO: 77%**
 - UNK: 8%
- More soreness might have been expected

Response to Intial Treatment



50 of 73 patients were better at all after the first treatment.

Reported Pain by Duration of Chief Complaint

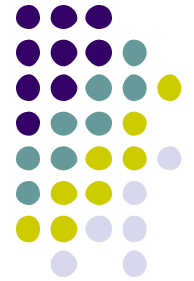


Clinically Meaningful Improvement in NRS



- Mean NRS
 - Decreased from 5.99 to 2.06
 - Difference: 3.93
- Could be clinically important

Number of Treatments for at Least 50% Improvement



	Known 50% Improvement	Mean # TX
All patients	77% (n=54)	4.0
Chronic	78% (n=31)	3.9
Subacute	81% (n=13)	4.0
Acute	77% (n=10)	4.3



Limitations

- Retrospective, convenience sample, administrative review and incomplete data, etc.



Conclusions

- Chiropractic care appears to have provided:
 - **effective** pain management
 - in the **short term** (under 6 weeks)
 - for **most** Medicaid patients in this study.



Future Directions

- Prospective study
- Response predictors
- Cost effectiveness [Policy implication]
- Integrated team management

Thank you!



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