

**MINISTRY OF HEALTH
DECISION BRIEFING DOCUMENT**

Cliff #695499

PREPARED FOR: Stephen Brown, ADM, Medical Services Division – **FOR DECISION**

TITLE: Acupuncture Services for Premium Assistance Recipients

PURPOSE: To prescribe Acupuncturists as health care practitioners under the *Medicare Protection Act, Medical and Health Care Services Regulation* and acupuncture services as a benefit for premium assistance recipients.

BACKGROUND:

In May 2007, representatives from the College of Traditional Chinese Medicine Practitioners and Acupuncturists of British Columbia (CTCMA) and the British Columbia Qualified Acupuncturists and Traditional Chinese Medicine Association met with Caucus to request the inclusion of acupuncture services as a benefit for premium assistance recipients. Acupuncture has been recognized as a health profession under the Health Professions Act since 1996 and is regulated by the CTCMA.

The Medical Services Plan (MSP) is administered by the Medical Services Commission (MSC) under the authority of the *Medicare Protection Act (MPA)*. All health professions receiving payment under the MSP are designated as health care practitioners under s.17 of the *Medical and Health Care Services Regulation* and are reported on by the MSC. These health professions are also subject to the comprehensive auditing and utilization management provisions contained in s.36 (2) in the *MPA*.

DISCUSSION:

The Ministry of Health is in the process of including acupuncture services as a supplementary benefit for premium assistance recipients. To maintain consistency with other supplementary benefit providers receiving payment under the Medical Services Plan, acupuncturists who are licensed by the CTCMA need to be designated as health care practitioners under s.17 of the *Medical and Health Care Services Regulation* and acupuncture services prescribed as benefits under s.1 of the *Medicare Protection Act (MPA)*.

Designation of acupuncturists under the *MPA* involves a number of steps:

- Acupuncturists need to be prescribed as practitioners by amending s.17 of the *Medical and Health Care Services Regulation*.
- Acupuncture services need to be prescribed as a benefit in the *Medical and Health Care Services Regulation* according to the definition of "benefits" under s.1 of the *MPA*; and,
- The MSC may need to establish a Special Committee under s.4 to undertake the Commission's audit powers which would require consultation with the CTCMA of BC.

FINANCIAL IMPLICATIONS:

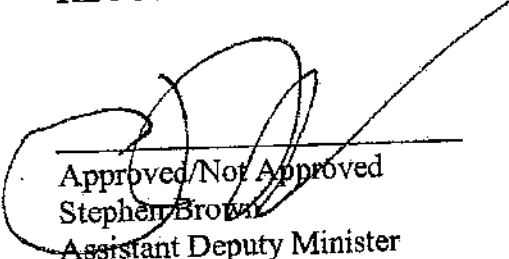
s.13

OPTIONS:

s.13

RECOMMENDATION:

s.13


Approved/Not Approved
Stephen Brown
Assistant Deputy Minister

OCT 04 2007

Date Signed

Program ADM/Division: Stephen Brown, ADM, Medical Services Division
Telephone: (250) 952-3465
Program Contact: Phyllis Chuly, Executive Director, Medical Services Branch
Date: October 1, 2007
File Name with Path: F:\Supp Benefits Blood and Lab Services\Briefing Notes\Supp
Bens\Acupuncture\ 695499 Designate Acupuncture as Practitioners under the MPA.doc

Holmes, Jenna HLTH:EX

From: Héalth, HLTH HLTH:EX
Sent: Thursday, May 8, 2008 9:02 AM
To: s.22
Subject: Ministry of Health Response - 720827

720827
s.22

Dear s.22

Thank you for your email, dated March 30, 2008, regarding the funding of acupuncture services within the Supplementary Benefits program. Your letter has been forwarded to me for response.

The Supplementary Benefits program in the Medical Services Plan (MSP) provides funding for health services that are supplementary to those provided by medical practitioners. Premium assistance patients receiving massage therapy, naturopathic services, chiropractic services, non-surgical podiatry, physiotherapy or acupuncture services are eligible to receive \$23 per visit for a combined maximum of 10 visits per year summed across all providers. Acupuncture services were included among the choices available to patients effective April 1, 2008.

Acupuncture has been regulated under British Columbia's Health Professions Act since 1996. Payment for these services, as with many health care services, is usually paid for privately by patients or through other health care plans. Acupuncture services funded through the Supplementary Benefits program must be rendered by a practitioner licensed by the College of Traditional Chinese Medicine Practitioners and Acupuncturists of BC to provide that service.

I appreciate your concern regarding the importance of evidence with respect to funding of services. You may find the structured health technology assessments by Aetna Healthcare Company (United States), Worksafe BC, the Alberta Heritage Foundation, the New Zealand Health Technology Association and the National Health Centre for Reviews and Dissemination (United Kingdom) to be of interest. This documented evidence in the literature outlines the effectiveness of acupuncture in addressing certain health conditions. This service has, therefore, been included in the choice of services from which patients in need can receive assistance through the Supplementary Benefits program.

Sincerely,

Jane Crickmore
Director
Supplementary Benefits, Blood and Lab Services

-----Original Message-----

From: s.22
Sent: Sunday, March 30, 2008 4:33 PM
To: Health, HLTH HLTH:EX
Subject: acupuncture

"In announcing the move, effective April 1, Health Minister George Abbott said acupuncture is an effective way to treat or manage a variety of health conditions."

Since I am now being forced to pay for treatments which the current scientific research shows is no better than placebo, can you please direct me to the scientific publications and research that you have which made you reach this conclusion. Which treatments specifically, and the scientific evidence showing acupuncture is effective in those treatments.

Thank you.

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Acupuncture and dry-needling for low back pain (Review)

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