



LEGISLATION

What Medicare Means to Me: A Patient's Perspective

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I was a young guy building houses when I had my first experience with acupuncture. In a bout with low back pain, I tried the usual superficial stretches, but had little luck. Then an old curmudgeon carpenter suggested I visit a local acupuncturist.

I felt something new in the treatment the acupuncturist provided. The tightness loosened up more deeply. That low back pain, I learned, was as much about kidney health as hoisting lumber and climbing ladders.

This year, I turned 60 (one full cycle of the Water Tiger) and I'm still benefiting from effective root-cause, restorative care from my acupuncturist.

For me, the years in between have been a journey of learning about, and engaging with, the acupuncture medicine system. I'm not a practitioner, but I built public policy and advocacy skills in a corporate health regulation career that I've gladly shared to help advance acupuncture medicine.



As a public member of our state's acupuncturist organization and board, I've been inspired to help policymakers understand the value and depth of this medicine; and help build upon a state practice law that hardworking pioneers put in place decades ago.

Today, I'm more inspired than ever. Now, more than ever before, enthusiastic patients are driving a growing recognition of acupuncture medicine in the health care and policy fields. This medicine is being integrated into hospital systems and benefit programs, private and public. The value of the medicine is coming into view for more and more policymakers.

Appropriation of acupuncture techniques by other professions can be exasperating (not to mention risky), but it highlights the growing recognition, and creates openings to deepen everyone's understanding of what separates comprehensive acupuncture medicine from the rest.

The effort to recognize acupuncturists as Medicare providers through H.R. 4803, the Acupuncture for Our Seniors Act, is the latest step in advancing the profession.¹ This effort is more than just a sign of progress; it's a true milestone. The integration of acupuncturists would raise the nation's largest health programs² to a new level of quality and effectiveness.

For patients and public supporters like me, it would make real the ideal of a national health care system that's responsive to what we value, and what we know about our own health.

It's certainly encouraging that some Medicare Advantage plans already include various acupuncture benefits.³ It's also encouraging that the traditional Medicare program now covers acupuncture for low

back pain, although with supervision caveats.³ But what's most exciting about the effort to integrate acupuncture practice into the health care delivery system is enabling acupuncturists to treat more conditions, and removing existing barriers between patients and the expert care of their providers.

I have plenty of family and friends in the Medicare program today who would surely benefit from acupuncture medicine for various pain conditions and much more. When I qualify for Medicare in a few years, I don't expect to be hoisting lumber and climbing ladders so much, but I do look forward to continued deeply effective care from my acupuncturist – and solid benefits for that care.

References

1. For full bill text and additional information, including co-sponsors and current bill status, [click here](#).
 2. For Medicare population data, [click here](#).
 3. For description of current coverage in traditional Medicare, [click here](#).
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This is the fifth article from the ASA Advocacy Committee on the impact of the Acupuncture for Our Seniors Act on our patients, profession and practices. H.R. 4803 will codify licensed / qualified acupuncturists as providers under Medicare who can work and bill independently as “licensed / qualified acupuncturists.” Currently, the Centers for Medicare and Medicaid Services (CMS) covers acupuncture for chronic low back pain/cLBP, but licensed / qualified acupuncturists cannot treat or bill Medicare patients because we are not recognized as providers under the Social Security Act.

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