

# THE BENEFITS & COST-EFFECTIVENESS OF CHIROPRACTIC CARE

## Benefits of Chiropractic

- Fully integrating chiropractic care in multidisciplinary settings reduces costs, absenteeism and increases employee retention for companies.<sup>1</sup>
- Chiropractic services offered at onsite corporate health clinics may promote lower utilization of certain costly healthcare services, while improving neuro-musculoskeletal function.
- Chiropractic Manipulative Therapy in conjunction with standard medical care offers a significant advantage for decreasing pain and improving physical functioning when compared with only standard care, for men and women between 18 and 35 years of age with acute low back pain.<sup>3</sup>
- According to data published by the Association of American Medical Colleges(AAMC), the U.S. could see an estimated shortage of between 21,400 and 55,200 primary care physicians by 2033. Therefore, access to medical care for Medicare patients will continue to increase in cost as the demand for care becomes higher.
- Approximately eight in 10 chiropractic patients agree that the quality of care they received was a good value for the money.<sup>2</sup>
- As part of an effort to improve the clinical effectiveness and value of spine care, Excellus BlueCross BlueShield, headquartered in Rochester, NY, introduced a Conservative Spine Care Pathway that incorporated manual care (primarily physiotherapy and chiropractic care) in one primary care clinic site (the intervention group) but not in another (the control). Each year, for each site, calculations of per-member-per-month (PMPM) spine care costs were recorded in of four categories: (1) all spine care (2) spine surgery care (3) opioid care, and (4) manual care (physical therapy or chiropractic spinal manipulation) for each attributed patient. Over the four years of the study, researchers recorded a 28% reduction in costs using a conservative approach compared to a 7% reduction in the standard approach. The authors stated that most of the reduction in cost was attributed to reduced spine surgery cost. <sup>4</sup>
- For older adults with chronic mechanical neck pain, spinal manipulative therapy (SMT) plus home exercise and advice (HEA) results in better clinical outcomes and lower costs versus supervised rehabilitative exercise (SRE) plus HEA, according to a study published by researchers from the University of Minnesota in Minneapolis. The study examined the clinical outcomes and cost-effectiveness of HEA, SMT plus HEA, and SRE plus HEA in a sample of 241 older adults with chronic mechanical neck pain over a one-year time horizon.<sup>5</sup>



- Older Medicare patients with chronic low back pain and other medical problems who received spinal manipulation from a chiropractic physician had lower costs of care and shorter episodes of back pain compared to patients in other treatment groups. Patients who received a combination of chiropractic and medical care had the next lowest Medicare costs, and patients who received medical care only incurred the highest costs.<sup>6</sup>

## Cost-Effectiveness of Chiropractic Care

- According to Advanced Medicine Integration (AMI) Group, Every \$1 spent on Complementary and Alternative Medicine (CAM) services, including chiropractic and AMI program fees, resulted in \$2.41 of medical expense savings.
- AMI of Rhode Island's ongoing Integrated Chronic Pain Program reduced per member per year total average medical costs by 27%, decreased the average number of ER visits by 61%, lowered the number of average total prescriptions by 63% and reduced the average number of opioid scripts by 86% for enrolled Community of Care (CoC) Medicaid members with chronic pain conditions..
- A study in the Journal of Manipulative and Physiological Therapeutics, analyzed 85,000 Blue Cross Blue Shield beneficiaries in Tennessee over a two-year span and concluded that back pain initiated with a doctor of chiropractic (DC) saves 20 to 40% on healthcare costs when compared with care initiated through a medical doctor.<sup>8</sup>
- A study by Mercer found that for neck pain, chiropractic care decreases annual spending by \$302 compared to medical physician care and that for low back pain, chiropractic increases total annual per patient spending by \$75 compared to medical physician care.

- Non-surgical spine episodes starting with a DC have the lowest total episode cost.
- According to Innovations in Conservative Care: Getting to the Right Provider First, if all non-surgical episodes NOT starting with a DC started with a DC, savings to the system would be \$1.3B per 195,000 episodes in this sample.
- Non-surgical spine episodes starting with a DC have the lowest total episode cost.
- DC remains the most affordable on a cumulative three-year look.
- If 20% of the episodes in the Optum Spinal Study not involving a DC were referred to a DC within 10 days of the start of treatment there is a high likelihood of improved patient care, more than \$300M savings to the system, and more than \$220M in revenue to DCs.
- According to a study in Innovations in Conservative Care: Getting to the Right Provider First, which covered a two-year span, projected a total savings of \$1.3B had its reported 14.7M non-surgical spinal episodes begun with chiropractic care

## Footnotes

<sup>1</sup> Value of Chiropractic Services at an On-Site Health Center

2012 Curt A. Krause, Lisa Kaspin, Kathleen M. Gorman, Ross M. Miller

10.1097/jom.0b013e31825a3507 Journal of Occupational & Environmental Medicine

<sup>2</sup> Gallup-Palmer College of Chiropractic Annual Report: Americans' Perceptions of Chiropractic 2016

<sup>3</sup> Effect of Usual Medical Care Plus Chiropractic Care vs Usual Medical Care Alone on Pain and Disability Among US Service Members With Low Back Pain

2018 Christine M. Goertz, Cynthia R. Long, Robert D. Vining, Katherine A. Pohlman, Joan Walter, Ian Coulter 10.1001/jamanetworkopen.2018.0105 JAMA Network Open

<sup>4</sup> Conservative Spine Care Pathway Implementation Is Associated with Reduced Health Care Expenditures in a Controlled, Before-After Observational Study

2019 William B. Weeks, Jason Pike, Jeremy Donath, Paul Fiocco, Brian D. Justice 10.1007/s11606-019-04942-7 Journal of General Internal Medicine

<sup>5</sup> Cost-effectiveness of spinal manipulative therapy, supervised exercise, and home exercise for older adults with chronic neck pain

2016 Brent Leininger, Christine McDonough, Roni Evans, Tor Tosteson, Anna N.A. Tosteson, Gert Bronfort 10.1016/j.spinee.2016.06.014 The Spine Journal

<sup>6</sup> The Association Between Use of Chiropractic Care and Costs of Care Among Older Medicare Patients With Chronic Low Back Pain and Multiple Comorbidities

2016 William B Weeks, Brent Leininger, James M Whedon, Jon D Lurie, Tor D Tosteson, Rand Swenson, Alistair J O'Malley, Christine M Goertz 10.1016/j.jmpt.2016.01.006 Journal of Manipulative and Physiological Therapeutics

<sup>7</sup> Integrated Chronic Pain Program (ICPP): Summary of Results 2016

<sup>8</sup> Cost of Care for Common Back Pain Conditions Initiated With Chiropractic Doctor vs Medical Doctor/Doctor of Osteopathy as First Physician: Experience of One Tennessee-Based General Health Insurer 2010

Richard L. Lilledahl, Michael D. Finch, David V. Axene, Christine M. Goertz 10.1016/j.jmpt.2010.08.018 Journal of Manipulative and Physiological Therapeutics

<sup>9</sup> Do Chiropractic Physician Services for Treatment of Low Back and Neck Pain Improve the Value of Health Benefit Plans?

2009 Nitesh Choudry, Arnold Milstein, Mercer Health & Benefits LLC