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White Paper Explores "Hidden Dimension" for Meeting the Nation's Primary Care Needs

UCLA health policy leader collaborates with an academic consortium to clarify optimal roles of doctors of chiropractic and naturopathic medicine, practitioners of acupuncture and Oriental medicine, and direct-entry midwives in the nation's primary care matrix

To participate in an April 9, 2013 media webinar at 1:00 EDT/10:00 PDT with UCLA co-author Dr. Michael Goldstein and ACCAHC's John Weeks, contact Renee Clugston at <u>rclugston@accahc.org</u>.

> For interviews contact: John Weeks 206-932-5799(o) 206-851-1758(c); jweeks@accahc.org

"This is the best compendium of thoughtful analysis and information on these disciplines that exists. I admire the scholarship of this document." Richard "Buz" Cooper, MD, healthcare workforce expert

April 2, 2013 (Seattle, Washington)

Have 106,000 licensed health care practitioners been left out of workforce planning on how to meet the nation's primary care needs?

This question is explored in a white paper generated by the Primary Care Project of the Academic Consortium for Complementary and Alternative Health Care (ACCAHC - <u>www.accahc.org</u>) in collaboration with UCLA Center for Health Policy Research senior research scientist Michael Goldstein, PhD.

The project is entitled: *Meeting the Nation's Primary Care Needs: Current and Prospective Roles of Doctors of Chiropractic and Naturopathic Medicine, Practitioners of Acupuncture and Oriental Medicine, and Direct-Entry Midwives.* These four distinct integrative medicine and health professions are sometimes referred to as "complementary and alternative medicine" (CAM) disciplines.

Goldstein describes the reasons for undertaking the project: "Even though significant numbers of people actively use these four licensed disciplines as their first choice for primary care, workforce analyses have not included the potential contributions of these disciplines."

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Goldstein notes that Section 5101 of the Affordable Care Act explicitly includes these licensed disciplines in a section on workforce planning. "Our goal with this paper is to assist policy makers, regulators, third-party payers, delivery system executives, administrators, practitioners, and other concerned parties -- as well as the disciplines themselves -- to discover the optimal use of these professions as part of the nation's primary care matrix."

The core of the white paper consists of four 6000-word chapters written by carefully-selected academic leaders of each discipline. These chapters probe the status of each profession relative to accepted and internal definitions of primary care. Topics include: state regulatory status, government agency recognition, educational standards, US Department of Education-recognized accreditation requirements, practice scope, research basis, and formal position statements.

Chapters Endorsed by Key National Academic Organizations

The ACCAHC Primary Care Project was engaged through partnership with national academic organizations associated with the four disciplines. These groups selected the authors for the discipline-specific chapter and subsequently endorsed that chapter. The partner organizations are the Association of Accredited Naturopathic Medical Colleges (www.aanmc.org), Association of Chiropractic Colleges (www.chirocolleges.org), Council of Colleges of Acupuncture and Oriental Medicine (www.ccaom.org) and the Midwifery Education Accreditation Council (www.meacschools.org).

In an Executive Summary and introductory chapter, Goldstein and John Weeks, co-director of the project and ACCAHC's executive director, offer analysis and recommendations. Goldstein notes: "In numerous jurisdictions, some of these disciplines are already legally recognized as primary care providers. More notably, some are currently already included in state medical home planning and programs to stimulate provision of primary care services to the underserved."

Recommendations: Engage and Research this Hidden Dimension of Primary Care

The authors' recommendations were endorsed by the Board of Directors of ACCAHC, the core membership of which is 17 national organizations. The Goldstein-Weeks team charge the disciplines to clarify identified gaps in training and to prioritize research on the profession's role in primary care. They recommend that policy makers and workforce planners to "prioritize learning about this hidden dimension of primary care delivery." One recommended means is through "funding and engaging high quality health services and epidemiological research on those individuals and families whose 'first choice' for treatment is a licensed practitioner from one of these four disciplines." The recommendations also urge "examining the contributions of these practitioners to patient satisfaction, quality of life, and cost."

Goldstein concludes: "It's clear that while generally unrecognized by the conventional medical community and workforce planners, these disciplines presently relieve some of the burden on the primary care system. These practitioner groups represent a hidden dimension of primary care in the United States. Especially in a patient-centered era with the emergence of patient-centered medical homes (PCMHs) and accountable care organizations (ACOs), these disciplines merit more focused and objective examination."

*About the Academic Consortium for Complementary and Alternative Health Care (ACCAHC): ACCAHC is a 501c3 organization the mission of which is to enhance patient care through fostering mutual respect and understanding among diverse healthcare professionals and disciplines. ACCAHC does so through education, convening and advocacy. ACCAHC is a leadership organization focused on advancing the whole person, team-based, health-focused values of integrative health. Core membership consists of the councils of colleges, accrediting agencies and certification and testing organizations from the 5 licensed complementary healthcare professions with a US Department of Education-recognized accrediting body (chiropractic, naturopathic medicine, acupuncture and Oriental medicine, massage therapy, direct-entry midwifery – together representing over 370,000 licensed practitioners). ACCAHC's leading projects include: participation in three Institute of Medicine (IOM) projects, one of which is sponsorship of the current IOM Global Forum on Innovation in Health Professional Education; assisting educators and clinicians in developing and enhancing Competencies for Optimal Practice in Integrated Environments; participation on steering/advisory teams of the Collaboration Across Borders IV conference on interprofessional practice and education, the Pain Action Alliance to Implement a National Strategy, Integrative Medicine for the Underserved and the HSRA-funded National Coordinating Center for Integrative Medicine; expanding evidence-informed education in ACCAHC schools; promoting a real world, patient-centered approach to research: providing collaboratively-developed perspectives on key policy issues; representing patient interest in whole person care into key national health dialogues; educating leaders in health-focused care; and developing a Center for Optimal Integration web portal. See Accomplishments at a Glance on the website. www.accahc.org; www.optimalintegration.org