

energing HEALTH CARE OPPORTUNITIES

AMTA MEMBER GUIDE

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The health care system in the U.S. is going through dynamic changes, and as a result, a variety of opportunities exist for massage therapists to get involved - now and in the future. As these unique arrangements grow, this guide is meant to provide AMTA members with new information to navigate this avenue for those who want to expand their practices or want to know more about emerging health care models.

Over the past several years, the United States has been engaged in an active debate about health care. The federal government's enactment of the Affordable Care Act is one result of this process, to which numerous state governments have responded with efforts to improve the health care systems in their states. These concepts of health delivery reform pre-date the 2010 passage of the Affordable Care Act, but the new law has created momentum for the development and implementation of integrated care models. In integrated care, health professionals and institutions work together to share information and coordinate care across multiple settings.

Health care systems are experimenting with a variety of models, which will continue to evolve for many years. These models attempt to improve the health care delivery system, with the goal of achieving the "Triple Aim" of better health care, better patient outcomes, and lower overall costs.

Many massage therapists are already partners in these models, demonstrating how our profession can function within team-based care models to deliver better patient results. Massage therapy has been growing rapidly in health care environments in recent years, as the health care community at large and consumers learn more about the benefits of massage. Nearly three quarters of all massage therapists report receiving referrals from other health care providers and more than a quarter work specifically in health care settings.

This guide is meant to be a practical tool for AMTA members to begin their own exploration of evolving opportunities. And, it provides a self-evaluation to help you decide if these opportunities are a good fit for you and for your practice. For a detailed look at the therapeutic value of massage therapy, a vision for its opportunities within health care models, and the cost effectiveness of massage as a therapeutic option, we encourage you to read The Value & Efficacy of Massage Therapy in Integrated Health Care and share it with prospective health care partners.

THE CURRENT RELATIONSHIP BETWEEN HEALTH CARE & MASSAGE THERAPY

Massage therapy is increasingly integrated into customary care in many hospitals. According to studies conducted for the American Hospital Association, massage therapy is the top CAM therapy offered in outpatient settings, and is the second most common CAM therapy offered in inpatient settings.

- In 2007, 53.9% of hospitals offered massage as an outpatient service; in 2010 it was up to 64%.
- Inpatient use of massage went from 40% in 2007 to 44% in 2010.
- Hospitals place greatest emphasis on their patients' needs: 78% said they chose therapies based on patient demand, 74% based on evidence, and 58% based on the availability of practitioners. Massage therapy ranks high on all three measures.
- Health care reform measures also emphasize patient satisfaction and shared decisionmaking about health care treatments.

Research confirms massage therapy dialogue between consumers and their health care providers.

- According to AMTA's 2013 consumer survey, more than 50 million American adults (16%) discussed massage therapy with their doctors or health care providers in the previous year.
- Of those, 62% of their doctors or health care providers strongly recommended massage therapy or encouraged them to get a massage.
- While physicians led the way in recommending massage (53%), chiropractors (42%) and physical therapists (41%) also recommended massage therapy when their patients discussed it with them.

Massage therapists are reporting similar trends.

- In 2013, 12% of massage therapists said they received referrals at least once per week, and another 26% received referrals several times per month.
- 53% of massage therapists received at least one referral every six months or less from a hospital or medical office.

This increasing recognition that massage therapy is an integral component of health care and wellness will further support opportunities for massage therapists. However, when looking at health insurance coverage for massage therapy, it is important to keep in mind that insurance reimbursement varies by state, health plan and provider. If you want to work toward insurance reimbursement for massage therapy, familiarize yourself with the specific health care models and reimbursement practices in your area.

HEALTH CARE REFORM AND EMERGING MODELS OF CARE DELIVERY

Many massage therapists are wondering what new opportunities might be available within emerging health care structures. Even before the Affordable Care Act (ACA) passed in 2010, there was movement toward models of care that were more patient-centered, value-based and designed to deliver higher quality care at a lower cost. As a result of the ACA, these progressive models have proliferated with the encouragement of federal, state and private policy-makers.

Two health care system models are at the core of modern health system reform—the **Patient-Centered Medical Home (PCMH)** and **Accountable Care Organizations** (**ACOs**). The objective of these two systems is to facilitate team-based approaches to care that focus on patient engagement, quality improvement, preventive initiatives, and multiple aspects of health and wellness. While there has been much debate on implementing health care reform, policymakers and public sentiment agree that containing health care costs while increasing access to quality care are necessary in reform.

These models are different from participating in other health care-related models in that:

- They are designed to be flexible for the community
- They promote value of services over volume of services
- They incentivize cost savings and quality care
- They include a focus on reducing spending on hospital care and prescription drugs

There are many ways health care reform is being implemented, and there is no singular format for participating in PCMHs or ACOs. Following are considerations to help you find the best approach and resources for inclusion in these models. Every ACO or PCMH will be different and you will need to adjust your approach and your expectations, based on how each group actually functions.

PCMH OVERVIEW

The **Patient-Centered Medical Home**¹ is a model of practice in which a team of health professionals, guided by a primary care provider, provides continuous, comprehensive and coordinated care to patients throughout their lives. The PCMH model, supported by community health teams as defined in the ACA, is designed to:

- Streamline care
- Avoid redundancies
- Enhance clinical effectiveness and cost-effectiveness
- Utilize the services of licensed health care practitioners in ways that best serve patients and extend the range of primary care physicians.

It's a health care setting that encourages partnerships between individual patients and their personal physicians; and, when appropriate it engages the patient's family.

¹See http://www.pcpcc.org/about/medical-home

WHAT'S INCLUDED IN THE PCMH MODEL

Most descriptions of the PCMH model include the following:

- Care should be team-based (these teams can be virtual, i.e., practicing in multiple locations)
- Each member of the team should "practice to the top of his/her license." The physician should not spend time on care that could be delivered as effectively and more efficiently by other members of the team.
- PCMH should manage referral patterns to outside providers. This is typically discussed in terms of referral to specialist physicians, but can also apply to referrals to allied health professionals, such as massage therapists.
- PCMH payment models typically provide an incentive to lower patients' total costs of care.

HOW MASSAGE THERAPY CAN FIT INTO A PCMH

The PCMH model is intended to function within a supportive health care community, the "medical neighborhood", which includes hospital, pharmacy, external specialists and other care providers.

ACO OVERVIEW

An Accountable Care Organization² is intended to be an integrated network of health care providers and hospitals (including PCMHs) that share responsibility for a group of patients.

- ACOs bring hospitals, providers and other caregivers into a coordinated, seamless care delivery system that promotes high-quality care and aligns incentives to more effectively focus on long-term preventive care.
- Large hospital systems, such as physician practices, need the fullest continuum of services possible.
- Typically, ACOs bear some financial risk for the total costs of care for their assigned populations.
- ACOs are a pillar of federal health care reform, since they are designed to both control total cost and improve quality and outcomes.

Medicare has adopted a "shared savings" program for ACOs. In the program, ACO providers will continue to receive their fee-for-service payments according to prevailing Medicare fee schedules. At the end of each year, if the actual cost is lower than the expected cost, the difference is deemed to be savings, and the ACO will receive half the savings as an incentive payment. Under another option in the program, the ACO can receive 60% of the savings, but would also pay 10% of any excess costs.

HOW MASSAGE THERAPY CAN FIT INTO AN ACO

ACOs must report quality and performance measures; currently, ACO quality measures focus primarily on preventive care and screening, chronic disease management, and patient satisfaction. Perhaps more importantly, the ACO is measured on the total cost of care for its population. If massage therapy reduces the total cost of care in the performance period, ACOs may benefit from including massage (and massage therapists) in their system. However, if massage therapy increases the total cost of care in the performance period, then ACOs have no financial incentive to consider it.

If massage therapists can provide services that are as effective as other treatments, but at a lower cost, then an ACO would naturally consider including massage therapists in its system.

²See http://innovation.cms.gov/initiatives/ACO/index.html

HEALTH CARE MODEL TAKEAWAY SUMMARY

- PCMHs are physician-led teams of providers caring for a group of patients
- PCMHs are intended to enhance quality of care through coordination of care
- ACOs can be seen as groupings of PCMHs, specialist physicians, and hospitals
- ACOs are driven by value, quality and cost containment
- Quality standards must be achieved in order to earn bonuses for cost reduction

A NOTE ON TRADITIONAL HEALTH INSURANCE

Emerging models of health care delivery seem to be different from traditional health insurance plans. Traditional health insurance works on the Fee-For-Service (FFS) model. FFS pays certain practitioners a fee for each service they provide. Insurers negotiate these fees with contracted providers and policy holders are financially encouraged (or mandated if in a Health Maintenance Organization) to use contracted providers. This system incentivizes health care practitioners on the volume of service and has little regard for the value of the health care services.

While FFS is a component of emerging ACO and PCMH models, quality, value and health outcomes are the driving forces behind these models. The Center for Medicare & Medicaid Services (CMS) has created a series of quality performance measures with 33 measures in four categories. Under the CMS ACO initiatives, before an ACO can share in any savings created, it must demonstrate that it met the quality performance standard for that year. CMS will measure quality of care using nationally recognized measures in four key domains³:

- 1. Patient/caregiver experience (7 measures)
- 2. Care coordination/patient safety (6 measures)
- 3. Preventive health (8 measures)
- 4. At-risk population:
- Diabetes (1 measure and 1 composite consisting of 5 measures)
- Hypertension (1 measure)
- Ischemic Vascular Disease (2 measures)
- Heart Failure (1 measure)
- Coronary Artery Disease (1 composite consisting of 2 measures)

³http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/Downloads/ACO-NarrativeMeasures-Specs.pdf

SIMILARITIES BETWEEN HMOs AND ACOs

- ACOs and HMOs both rely on the creation of physician networks, and promotion of member health and resource management to control costs.
- ACOs and HMOs both seek to coordinate overall care delivery for patients.

DIFFERENCES BETWEEN HMOs AND ACOS

While ACOs may seem like a newer version of Health Maintenance Organizations (HMOs), they have key differences. One key difference is that HMOs embody a "top down" approach to care management, seeking to review and coordinate services from a centralized organization. ACOs take a more "bottom up" approach, relying on health professionals to work with each other to treat patients. Other key differences include:⁴

- HMOs are insurance programs that provide health care to a defined population for a fixed price.
- ACOs are not insurance companies and their providers will be financially rewarded for coordinating all aspects of patient care.
- Primary care providers will need to increase their reliance on nurse practitioners, pharmacists and other members of the health care team to track appointment compliance, manage medication schedules and oversee lifestyle changes.
- Patient participation in ACOs is strictly voluntary, there are no enrollment or lock in provisions.
- ACO patients can be seen by any physician of their choice.
- Patients who are unhappy with their care in an ACO are free to seek treatment elsewhere.
- Consistent with traditional Medicare rules, there are no gate keeping or pre-authorization provisions in the ACO model and patients aren't required to obtain a referral before consulting with another provider.

IMPORTANT CONSIDERATIONS FOR MASSAGE THERAPISTS

The inherent flexibility of emerging health care models creates potential opportunity for massage therapists to participate in the coordinated care of patients--but, with this flexibility comes inconsistency in models. As these models continue to evolve, trends and best practices may develop in the administration and coordination of care. However, at this point in time, there is no one standard or best practice for practitioners wanting to participate.

Because each ACO will operate differently, they will present different opportunities ranging from referral opportunities to employment opportunities. Payment and wage models will also vary. Direct payment, ACO payment, salary or a flat fee are all potential options.

https://www.rmf.harvard.edu/Clinician-Resources/Article/2012/ACOs-vs-What-We-Know

THE AFFORDABLE CARE ACT AND YOUR PRACTICE: A MASSAGE THERAPIST'S EVALUATION TOOL

All aspects of health care are continually evolving, including collaboration opportunities for massage therapists. Use this evaluation to help you decide if working within current and future health care models may be a good fit for you.

1. SELF-EVALUATION

- Do I have the necessary education and training to handle complicated medical cases?
- Am I willing to take additional continuing education to enhance my skills in anatomy and pathology, to learn about specific health conditions that may be referred to me, and to learn massage therapy approaches that may benefit new clients?
- Am I able to communicate with the medical treatment team using medical vernacular?
- Do I have the clinical skills to be integrated with the health care team? Expected clinical skills should encompass assessment, clear identification of short- and long-term goals, the ability to develop an appropriate treatment plan, and determining the particular techniques appropriate to specific tissues or conditions.
- Can I modify my massage technique to treat specific areas rather than performing a full body relaxation massage?
- Does my state license consider me a licensed health care provider?
- Do I feel comfortable working in a multidisciplinary treatment team which involves constant collaboration to achieve the best patient/client outcome and satisfaction?

2. PRACTICE EVALUATION

- Do I want to become part of an integrated health practice as an employee?
- Do I want to remain independent and receive referrals from ACOs and PCMHs?
- If I remain independent, am I willing to spend 25-30% of my massage practice time in marketing, developing relationships with providers, attending treatment team meetings, and using the electronic medical record?
- Do I currently have a Federal Provider number (NPI) for identification and billing?
- Do I have access to a HIPAA certified method of communication of patient information?
- Do I have or can I establish competency in the Electronic Medical Record (EPIC)?
- Is my practice handicap accessible and modifiable for special needs clients?
- Do I maintain the organizational skills to handle multiple and diverse referrals from various providers and stay current on session records and plans, and team meetings and billing procedures?
- Am I willing to receive less reimbursement for my services and build my practice through volume-based strategies?
- Am I willing to invest time in research as well as possibly participate in research studies to help advance our profession in the world of integrated health care?

GETTING STARTED

If any of these models of health care collaboration seem like a good fit for you, here are a few tips for getting started. Check out these resources to help inform your decision making and implementation.

- Research requirements for your local insurance providers and credentialing requirements for hospitals and other health care providers with whom you may be interested in working.
- 2. Identify PCMHs and ACOs in your community. Useful resources include:
- a. For PCMHs: http://recognition.ncqa.org/
- b. For ACOs: http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/shared-savingsprogram/News.html
- 3. Research the ACO, PCMH, or health care practice you're interested in and ask these questions:
- a. Do they or will they consider massage therapists?
- b. Do they currently employ or refer to massage therapists?
- c. Do they approach massage therapists as employees or contractors, or do they only refer?
- d. Who makes the decisions for including participating providers?
- e. How can I help coordinate patient care?
- f. How can you add to the value of the organization?
- If they currently use massage therapy, focus on promoting yourself and your experience. In this instance, you can approach them as you would for a similar job interview.
- 5. If the organization does not include massage therapy, review the material AMTA has provided and educate decision makers on the value massage therapy can bring to their organization and their patients. Provide AMTA education resources and consider sharing success stories to reinforce the value massage therapy brings to the organization—this can be most effective if you can demonstrate a cost savings for massage vs. other treatments. Your past experience, even if it has not been within a health care environment, may help you demonstrate this.



6. If you already have experience in other health care models, examine the new models to see if you can or want to expand into them. Your past experience, coupled with infor-

see if you can or want to expand into them. Your past experience, coupled with information on the value of massage therapy and its potential for economic savings could be a fruitful professional avenue for you.

The health care system in the U.S. is going through dynamic changes. As a massage therapist, you can choose whether or not to integrate your practice into the health care models being developed. New opportunities are always coming to light, but they all require self-assessment of your professional goals, knowledge and experience.

RESOURCES

AMTA has the information you need to start conversations on the health benefits of massage therapy.

- A growing body of research supports massage therapy for health and wellness. Access research supporting the health benefits of massage and information on trends in the profession at amtamassage.org/research.
- Find downloadable handouts, Research Roundups, and videos on the health benefit of massage to share with providers at amtamassage.org/clientresources.
- Take AMTA's online course The Affordable Care Act and the Massage Profession for in-depth information on how the ACA will affect the massage therapy profession at amtamassage.org/learn.
- Get the facts on insurance reimbursement, including managing health care paper work and what to expect, at amtamassage.org/insurancereimbursement.
- At the end of this guide are handouts you can immediately use, including a sample introductory letter to physicians and the client handout Talking to Your Physician About Massage.

WHAT ARE SOME OF THE MOST IMPORTANT THINGS MASSAGE THERAPISTS SHOULD KNOW BEFORE CONSIDERING

INSURANCE REIMBURSEMENT? "Health care is a moving landscape, and it's easy to get intimidated. In order to continue to advance our profession, we, as massage therapists, need to be willing to be part of the larger health care conversation. And just like every state handles the licensing of massage therapists differently, each insurance company handles billing and reimbursement differently. Massage therapists should first educate themselves about insurance reimbursement before determining if it can be beneficial to their practice."

-Susan Rosen, AMTA's representative to the American Medical Association's (AMA's) Current Procedural Terminology (CPT) Health Care Professional's Advisory Committee

FURTHER READING:

The Center for Consumer Information & Insurance Oversight

www.cms.gov/cciio

Accountable Care Organization (ACO) Facts

www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ACO/index.html

Kaiser Family Foundation Healthcare Reform Information

www.kff.org/health-reform

KFF Profiles of State Health Insurance Exchanges

www.kff.org/state-health-exchange-profiles

Department of Labor Healthcare Reform Resources (including FAQ)

www.dol.gov/ebsa/healthreform

Government Information Hub for Healthcare Reform

www.healthcare.gov

All ACA-Related Federal FAQs

www.naic.org/documents/index_health_reform_faq.pdf

Agency for Healthcare Research and Quality: PCMH Resource Center

www.pcmh.ahrq.gov/portal/server.pt/community/pcmh_home/1483

National Provider Identifier Standard

https://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/NationalProvIdentStand/index.html?redirect=/NationalProvIdentStand/03_apply.asp

The Centers for Medicare & Medicaid Services offers a map to view local innovation models as well as the health care facilities where Innovation Models are being tested.

http://innovation.cms.gov/initiatives/map/index.html

SAMPLE INTRODUCTORY LETTER TO PHYSICIANS

Dear	Dr	
Deal	υ ι.	

My name is , and I am a licensed massage therapist. I want to tell you a little bit about myself and how massage therapy can support your patients' health regimens.

I have experience in actively participating with health care teams and am able to communicate through standard forms of documentation. Enclosed is my resume and sample copies of my charting and report writing style. I am committed to keeping my referring physicians apprised of their patients' progress.

Medical research supports the health benefits of massage for conditions such as pain, stress, depression, fibromyalgia and many more. Enclosed is additional information about the benefits of massage therapy specific to conditions your patients might experience.

Professionalism, communication and quality health care are my strengths. Please contact me if you wish to discuss any of this information in more depth or when your patients have the need for a qualified massage therapist.

I look forward to working with you.

Sincerely, [name] Licensed Massage Therapist (LMT) [include other credentials, if applicable)





Living Right: Talking to Your Physician about Massage

According to the results of a recent survey conducted by the American Hospital Association's Health Forum and Samueli Institute, a nonprofit research organization, 40 percent of hospitals indicated they offer one or more alternative therapies —up a full 37 percent from 2007.

Responding to patient demand and the increasing cost of health care, more and more hospitals are taking a good look at complementary and alternative therapies—including massage therapy—to help patients with a variety of issues. From back and neck pain to stress relief, doctors and hospitals are beginning to think a little differently about how they might help patients better deal with some of these conditions.

"Today's patients have better access to health information and are demanding more personalized care," says Sita Ananth, study author and director of knowledge services for the Samueli Institute. "The survey results reinforce the fact that patients want the best that both conventional and alternative medicine can offer, and hospitals are responding."

Of the hospitals that responded to the survey, **64 percent reported using massage therapy as part of outpatient care**, and **44 percent use massage therapy as part of inpatient care**.

These results dovetail nicely with the findings of a reader survey published in the September 2011 issue of Consumer Reports, where three out of four adults reported using some form of alternative therapy for general health. Chiropractic, deep tissue massage and yoga all dominated the lists of helpful treatments for conditions such as back pain, neck pain and estenarthritis.

According to the report, survey respondents indicated that yoga, deep tissue massage and Pilates rated the same as prescription medications for help with back pain. And some of the respondents initially looked to complementary and alternative therapies upon the suggestion of their physicians. "Twenty-eight percent of readers who used deep tissue massage, usually for back or neck pain, said their doctors had recommended it," the report explains.

What This Means For You

As researchers begin to learn more about the benefits of massage therapy, don't be afraid to talk with your doctor about how massage might fit into your overall health care regimen.

And, talk to your massage therapist openly and honestly about the benefits you want to receive from massage therapy. Take some time to gather information on your own. There are quite a few resources out there that can help you better understand the research being done on the benefits of massage therapy, as well as the different techniques your massage therapist might use.

How to Find a Professional Massage Therapist

Finding a professional massage therapist is vital to a positive massage experience. AMTA massage therapists have demonstrated a level of ability through education and/or testing, adhere to a code of ethics and must meet continuing education requirements. AMTA offers a free professional massage therapist locator service at findamassagetherapist.org.

More Resources

AMTA has a wide variety of information for consumers—including clinical research on the efficacy of massage therapy, how to find a qualified massage therapist, as well as tips for getting the most from your massage. Visit findamassagetherapist.org to get started.



ABOUT THE AMERICAN MASSAGE THERAPY ASSOCIATION

The American Massage Therapy
Association (AMTA) is the largest
nonprofit professional association
representing massage therapists,
massage students and massage
schools. AMTA works to establish
massage therapy as integral to the
maintenance of good health and
complementary to other therapeutic
processes and to advance the
profession through ethics and
standards, continuing education,
professional publications, legislative
efforts, public education, and fostering
the development of members.

More information: amtamassage.org

