



July 24, 2019

Dear Colleagues and Supporters of Acupuncture:

The first stage of action needed regarding acupuncture's inclusion to Medicare is upon us. We have until August 15, 2019 to respond to the CMS call for comments on the proposed study of acupuncture for low back pain. This period of study would cover acupuncture as part of the research and data gathering process. Once this study period is complete, the data will be analyzed and a determination will be made as to whether to cover acupuncture for low back pain in general. Please do respond to this call! While it is wonderful that acupuncture is being studied at this level, it is equally critical that Licensed Acupuncturists and the service they provide be clearly recognized. Without such, the public may be able to get acupuncture, but not from the group most extensively trained to provide it!

*The Centers for Medicare & Medicaid Services (CMS) proposes to cover acupuncture under section 1862(a)(1)(E) of the Social Security Act (the Act), with the support of the Agency for Healthcare Research and Quality under section 1142 of the Act. We propose that coverage would be available for Medicare patients with chronic low back pain in clinical trials supported by the National Institutes of Health (NIH) or in CMS approved studies meeting AHRQ criteria.*

You'll find the access to the complete documents at [National Coverage Analysis \(NCA\) for Acupuncture for Chronic Low Back Pain \(CAG-00452N\)](#)

And the link for commentary here: [PUBLIC COMMENTS](#)

We ask you to highlight a number of points in your responses:

- Thank CMS for their consideration of this topic. This represents a massive step towards the incorporation of acupuncture into national health care.
- Ask that the section that includes "auxiliary providers" be changed to more clearly name "Licensed Acupuncturists or state equivalent". The qualifications for auxiliary providers exactly describe this licensure group.
  - Make commentary directly about the laws in your state to highlight your required training, supervision (or lack thereof), and certification.
- Ask that the supervision required during the study portion be done only by an MD. Supervision by other licensure types does not have a precedent, nor does it add in any way to the safety or quality of the trials. (Note: supervision in general is only under comment for the trial phase. This does not apply to general practice. It is likely that, for CMS, supervision by an MD will be required for the study period.)
  - Make commentary directly about the laws in your state regarding supervision of practice. Who can practice in your state? Do you have a supervision requirement?

Please take a look at the ASA letter attached, and feel free to take language from that! Please encourage all supportive parties to take part in this comment period. Please remember that this is a groundbreaking moment in history for this type of work, and that some error in concept is inevitable. We hope that increasing familiarity with the Licensed Acupuncturist (or state equivalent) licensure group will advance dialog and improve future efforts. Polite, constructive, succinct responses will be most appreciated and effective.

Sincerely,

The Board of the American Society of Acupuncturists