

National Pain Strategy

Public Health: Service Delivery and Reimbursement

Robert Kerns, Ph.D; Mark Wallace, M.D.

IPRCC Meeting

February 4, 2014



Working Group Roster

- Co-Chair: Robert Kerns, PhD
- Co-Chair: Mark Wallace, MD
- Paul Arnstein, PhD, RN, FAAN
- Sean Cavanaugh
- Jan Favero Chambers
- Jack Conway, JD
- Elizabeth Gilberston, MA
- Christopher Jones, PharmD, MPH, LCDR
- Karl Lorenz, MD, MSHS
- Brook Martin, MPH, PhD
- Judith Paice, PhD, RN, FAAN
- Patricia Sinot, PT, MPH, PhD
- Steven Stanos, DO
- Marianne Udow-Phillips
- Catherine Underwood, MBS, CAE
- CAPT Sheri Yoder, Pharm D, BCPS
- Tim Furnish, MD (non-voting member)

Priorities

Priority 1

- To develop public policy recommendations that defines future payment, and incentives, for evidence-based integrated multimodal care and interdisciplinary team care of persons with chronic pain.

Priority 2

- Target CMS with policy and guideline recommendations on how to achieve policy.

Priority 3

- Engage pain societies for input/endorsement

Priority 4

- Determine impact of deliverable on quality, access and cost

Framework

- Describe the current and future state of pain care delivery:
 - Integrated multimodal care/interdisciplinary team care
 - How evidence is applied to care
 - Payment/incentive methods/EMR
- Determine deficiencies (gaps) between the current and future care.
- Provide guidelines for achieving future state of pain care delivery
- Identify and consider framework of other chronic disease states that may serve as a model for our charge

Proposed Deliverables and Time Frame

Proposed Deliverables

- Deliverable 1 – Target CMS with policy recommendations for future service delivery and reimbursement for chronic pain and guidelines on how to achieve future state
- Deliverable 2 – Engage pain societies for input/endorsement of the policy
- Deliverable 3 – Determine impact of deliverable on quality, access, and cost

Time Frame

- Deliverable 1 – Completion Date – July, 2014
- Deliverable 2 – Completion Date – December, 2014
- Deliverable 3 – Completion Date - 2017

Next Steps

Step 1

- Divide into working groups to define current and future state
 - Integrated multimodal care/interdisciplinary team care
 - How evidence is applied to care
 - Payment/incentive methods/EMR
- Identify frameworks for other chronic disease states

Step 2

- Write policy for future state

Step 3

- Determine gaps between current state and future policy

Step 4

- Develop guidelines on how to achieve future policy