

# Fibromyalgia in Oregon – Let’s put it above the line!

Oregon is the ONLY state in the U.S. whose state Medicaid plan does not cover treatments for fibromyalgia.

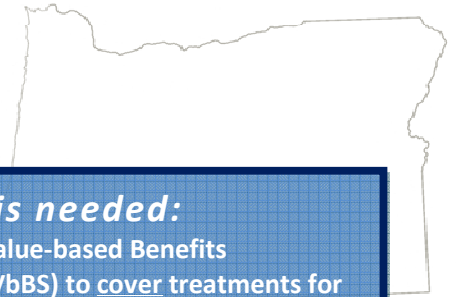
**Care for Oregon patients. Oregon’s Value-based Benefits Subcommittee (of the Health Evidence Review Commission, or HERC) recently agreed** to consider the request from the National Fibromyalgia & Chronic Pain Association to begin covering Fibromyalgia for Oregon’s Medicaid enrollees. Currently, fibromyalgia is currently “below the line” of covered conditions, meaning it must be prioritized to gain coverage.

- Statistically, at least 117,000 Oregonians, or 3% of the state’s population, have Fibromyalgia;
- Fibromyalgia is a studied and treatable disease, with successful therapies that include medications, exercise, cognitive therapy and education; and
- Coverage will mean earlier diagnosis, better symptom management, fewer people on disability payments, and financial savings of health care resources.

In October, 2014, **new ICD-10 codes** will be issued, and for the first time, fibromyalgia will have a dedicated diagnostic code. Oregon providers can use this new code to better diagnose and treat fibromyalgia patients, while augmenting their reimbursements. The new Social Security Administration Ruling qualifies fibromyalgia as a medical disability (as of July, 2012).

**Research. Recent research shows fibromyalgia is a chronic disorder with evidence-based guidelines**, and patients suffer at the same or greater magnitude versus other musculoskeletal and/or debilitating conditions.<sup>1,2</sup> Early diagnosis and effective treatment of Fibromyalgia saves money;<sup>1,3,5</sup> improves functionality and productivity;<sup>3,4</sup> reduces personal suffering, the impact on families and communities, and long-term disability.<sup>1,3,4</sup> Not treating or under-treatment drives up utilization and costs.<sup>3,4,6</sup> Moreover, treating individual fibromyalgia symptoms under different diagnostic codes in a piecemeal fashion does not result in best outcomes for management of the overall serious and debilitating nature of this condition.

1. Kim SK, Kim SH, Lee CK, *et al.* Effect of fibromyalgia syndrome on the health-related quality of life and economic burden in Korea. *Rheumatology* 2013; 52:311-320.  
2. Smith HS, Harris R, Clauw D. Fibromyalgia: An Afferent Processing Disorder Leading to a Complex Pain Generalized Syndrome. *Pain Physician* 2010; 14:E217-245. Also accessible online at <http://www.painphysicianjournal.com/2011/march/2011;14;E217-E245.pdf>.  
3. Rivera J, Rejas-Gutierrez J, Vallejo MA, *et al.* Prospective study of the use of healthcare resources and economic costs in patients with fibromyalgia after treatment in routine medical practice. *Clin Exp Rheumatol* 2012; 30 (Suppl. 74):S31-S38.  
4. Chandran A, Schaefer C, *et al.* The comparative economic burden of mild, moderate, and severe fibromyalgia: results from a retrospective chart review and cross-sectional survey of working-age U.S. adults. *Managed Care Pharmacy* 2012; 18:6.  
5. Annemans L, Wessely S, *et al.* Health economic consequences related to the diagnosis of fibromyalgia syndrome. *Arthritis & Rheumatism*, 2008; 58:3:895-902.  
6. Spaeth M. Epidemiology, costs, and the economic burden of fibromyalgia. *Arthritis Research & Therapy*, 2009;11:117.



## Your action is needed:

Ask the HERC’s Value-based Benefits Subcommittee (VbBS) to cover treatments for Oregon’s fibromyalgia patients who are enrolled in Medicaid. The meeting is Thursday, October 10, 2013.

Write to the director of the Oregon Health Authority, Bruce Goldberg, M.D. - [bruce.goldberg@state.or.us](mailto:bruce.goldberg@state.or.us).

Write to the members of the VbBS and HERC before Oct. 3. Address to [Darren.D.Coffman@state.or.us](mailto:Darren.D.Coffman@state.or.us) and [ariel.smits@state.or.us](mailto:ariel.smits@state.or.us).

Ask your colleagues and patients to write and/or testify.

Attend and testify on Thursday, October 10 at the VbBS meeting from 8:30 a.m. to 1 p.m., at Legacy Meridian Park Hospital’s Community Health Education Center, 19300 SW 65<sup>th</sup> Ave., Tualatin, OR 97062.

See additional details at <http://www.oregon.gov/OHA/OHPR/Pages/herc/index.aspx>.

For more info, contact Jan Chambers, president and founder of the National Fibromyalgia & Chronic Pain Association, (801) 200-3627.

