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Intensive Outpatient Pain Management Shown as Cost-Effective Method for Treating High Utilizer Chronic Pain Patients

March 16, 2017, ORLANDO, Fla. – High utilizers of medical services account for disproportionate healthcare costs, with up to 21% of expenditures spent treating the top 1% of patients (Jiang et al, Characteristics of Hospital Stays for Super-Utilizers by Payer, 2012. Agency for Healthcare Research and Quality H-CUP Nov 2014), and chronic pain patients account for a substantial proportion of high utilizers (Harris et al *J Emerg Med.* 2016;50(4);e203-14).

A recent study at Duke University presented as a scientific poster abstract today at the 33rd Annual Meeting of the American Academy of Pain Medicine assessed how the development of an intensive, individualized pain management program for high utilizers affected an institutions' financial outcome metrics.

To conduct this study, researchers established a cohort of 31 high utilizer patients with a comorbid diagnosis of chronic pain from April 2014 to July 2015. Patients in the cohort were referred to the Duke Medical Pain Service (MPS), an intensive outpatient pharmacologic management program that employs a physician-led care team specializing in both psychiatry and pain medicine.

After having been in MPS's care for approximately one year, the cohort's inpatient and outpatient financial data were analyzed to determine utilization patterns before and after the cohort initiated MPS treatment. Looking at 14 cost centers, the study found that care costs for patients in the cohort (calculated for total and yearly amounts) were reduced by 55% and 45% respectively. The cost per patient was reduced by nearly \$9,000 per year.

According to Steven Prakken, MD, lead author of the study and a pain medicine specialist at Duke Health, MPS staff use a functional pharmacology approach to treat patients with an expanded array of medications in order to optimize both pain and its psychiatric comorbidities. "The focus of MPS intervention is not simply reduction of pain. It is optimized patient function

across multiple domains, both somatic and psychological,” says Dr. Prakken. “Our method is unique in that a multidisciplinary approach can be encompassed in a single visit with a single practitioner, therefore addressing more adequately the patients’ many needs.”

This study supports the notion that an interdisciplinary treatment modality is especially effective when treating high utilizer patients in order to provide cost-effective, quality care; a finding that is especially important as the financial burden of health care in the U.S. continues to grow and more than 100 million Americans suffer from chronic pain.

“This research shows a clear path forward in containing the cost of an ever-expanding population. Reproducing effective treatment modalities such as that of the Medical Pain Service, which dramatically reduces hospital system costs, may well lead the way to successful health care cost containment in the future,” says Dr. Prakken.

Poster 181 – Cost Savings Associated with Intensive Outpatient Pain Management of Duke Health System High Utilizers

About AAPM

The American Academy of Pain Medicine is the premier medical association for pain physicians and their treatment teams with some 2,000 members. Now in its 34th year of service, the Academy’s mission is to optimize the health of patients in pain and eliminate pain as a major public health problem by advancing the practice and specialty of pain medicine through education, training, advocacy and research. Information is available on the Academy’s website at www.painmed.org.

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