

**Health Technology Clinical Committee
FINAL Findings and Decision**

Topic: Acupuncture
Meeting date: March 18, 2022
Final adoption: May 20, 2022

Number and coverage topic:

20220318A – Acupuncture for Chronic Migraine and Chronic Tension-type Headache

HTCC coverage determination:

Acupuncture is a **covered benefit with conditions**.

HTCC reimbursement determination:

Limitations of coverage: This decision applies to adults (age 18 and older).

- For chronic migraine (as defined by the International Headache Society), acupuncture is a **covered benefit with the following conditions:**
 - Must be diagnosed with chronic migraine by a qualified provider (per Washington State Department of Health),
 - For up to 24 sessions over the course of one year, and
 - Additional treatment cycles may be considered at agency discretion.

Non-covered indicators:

Acupuncture is not covered for:

- Chronic tension-type headache
- Chronic daily headache

Notes:

- Out of scope/data not reviewed for this decision:
 - Other headache and migraine types not specified
- This determination supersedes the following previous determination:
 - Acupuncture policy as previously determined in Treatment of Chronic Migraine and Chronic Tension-Type Headache (20170519B)

Related documents:

- [Final key questions](#)
- [Final evidence report](#)
- [Meeting materials and transcript](#)

Agency contact information:

Agency	Phone Number
Labor and Industries	1-800-547-8367
Public and School Employees Health Plan	1-800-200-1004
Washington State Medicaid	1-800-562-3022

Final

HTCC coverage vote and formal action:

Committee decision

Based on the deliberations of key health outcomes, the committee decided that it had the most complete information: a comprehensive and current evidence report, public comments, and state agency utilization information. The committee decided that the current evidence on acupuncture for chronic migraine and chronic tension-type headache was sufficient to make a determination. The committee discussed and voted separately on the evidence for the use of acupuncture for chronic migraine, chronic tension-type headache, and chronic daily headache. The committee considered the evidence, public comment and expert input, and gave greatest weight to the evidence it determined, based on objective factors, to be the most valid and reliable.

Based on these findings, the committee voted to cover with conditions acupuncture for chronic migraine. Separately, the committee voted not to cover acupuncture for chronic tension-type or chronic daily headache.

	Not covered	Covered under certain conditions	Covered unconditionally
Acupuncture for chronic migraine	3	7	0
Acupuncture for chronic tension-type headache	9	1	0
Acupuncture for chronic daily headache	9	1	0

Discussion

The committee reviewed and discussed the available studies for use of acupuncture for chronic migraine and chronic tension-type headache. Conditions for coverage were discussed, drafted, and voted on. A majority of committee members supported the conditions of coverage for acupuncture. Details of study design, inclusion criteria, outcomes, cost, cost-effectiveness, and other factors affecting study quality were discussed.

Limitations

This decision applies to adults (age 18 and older) with chronic migraine or chronic tension type headache.

- For Chronic Migraine (as defined by the International Headache Society): Acupuncture is a covered benefit with conditions
 - Must be diagnosed with chronic migraine by a qualified provider (qualified to diagnose per Washington State Department of Health)
 - Up to 24 sessions over the course of one year
 - Additional treatment cycles may be considered at agency discretion

Not covered conditions:

- For Chronic Tension-type Headache: Acupuncture is non-covered
- For Chronic Daily Headache: Acupuncture is non-covered

Action

The committee checked for availability of a Centers for Medicare and Medicaid Services (CMS) national coverage decision (NCD). There is no NCD for acupuncture for chronic migraine or chronic tension-type headache as reviewed.

The committee discussed clinical guidelines identified from the following organizations:

- European Academy of Neurology (EFNS) *EFNS guideline on the treatment of tension-type headache – Report of an EFNS task force* (2010) (Included in prior report)
- National Institute for Health and Care Excellence (NICE) *Headaches in over 12s: diagnosis and management* (2012) (updated in May 2021) (Included in prior report)
- Institute for Health Economics & Towards Optimized Practice *Primary care management of headache in adults: clinical practice guideline*. (2016)
- VA/DoD *VA/DoD Clinical Practice Guideline for the Primary Care Management of Headache* (2021)
- Study Group for Chronic Headache Clinical Practice Guideline Development and The Japanese Headache Society *Clinical practice guideline for chronic headache 2013* (2019)
- China Association of Chinese Medicine *Report of guidelines for diagnosis and treatment of common internal diseases in Chinese medicine: Headache* (2019)
- National Clinical Guidelines for Qatar *Clinical Guidelines for the State of Qatar: Headaches in adults* (2016)

The recommendations of the guidelines vary. The committee's determination is consistent with the noted guidelines.

The committee vice chair directed HTA staff to prepare a findings and decision document on use of acupuncture for chronic migraine and chronic tension-type headache for public comment to be followed by consideration for final approval at the next committee meeting.

Health Technology Clinical Committee Authority:

Washington State's legislature believes it is important to use a science-based, clinician-centered approach for difficult and important health care benefit decisions. Pursuant to chapter 70.14 RCW, the legislature has directed the Washington State Health Care Authority (HCA), through its Health Technology Assessment (HTA) program, to engage in an evaluation process that gathers and assesses the quality of the latest medical evidence using a scientific research company that takes public input at all stages.

Pursuant to RCW 70.14.110, a Health Technology Clinical Committee (HTCC) composed of eleven independent health care professionals reviews all the information and renders a decision at an open public meeting. The Washington State HTCC determines how selected health technologies are covered by several state agencies (RCW 70.14.080-140). These technologies may include medical or surgical devices and procedures, medical equipment, and diagnostic tests. HTCC bases its decisions on evidence of the technology's safety, efficacy, and cost effectiveness. Participating state agencies are required to comply with the decisions of the HTCC. HTCC decisions may be re-reviewed at the determination of the HCA Director.