

## Hypnosis allies are urging insurers to raise coverage

**Health-care providers join forces to convince insurers of hypnosis' potential benefits and savings.**

**By Jeannine Mjoseth**  
*Monitor staff*

**A** unique alliance of psychologists, physicians, dentists and social workers is launching a campaign to educate insurers about hypnosis' ability to improve mental health and medical outcomes, reduce patient suffering and cut the costs of providing care.

Members of the group, namely APA's Div. 30 (Psychological Hypnosis), the Society of Clinical and Experimental Hypnosis (SCEH) and the American Society for Clinical Hypnosis (ASCH), hope insurers will follow Medicare's lead of reimbursing for hypnosis and even expand covered treatments. The three groups are the principal associations for health-care providers who use hypnosis.

The alliance will present to insurers outcome studies that document the success of hypnosis in treating a variety of medical and health-threatening behavioral problems. Research shows, for example, that smoking-cessation treatments using hypnosis are twice as effective as treatment without hypnosis, and patients require much less pain medication during invasive medical procedures when using self-hypnosis, says Edward Frischholz, PhD, president-elect of Div. 30.

The alliance also will present a meta-analysis of 18 studies, which indicates that **the average client treated by hypnosis-enhanced cognitive-behavioral therapy showed greater improvement than at least 70 percent of clients receiving nonhypnotic cognitive behavioral therapy.** The analysis was performed by Irving Kirsch, PhD, noted research psychologist at the University of Connecticut, and lead editor of an upcoming APA book called 'Clinical Hypnosis and Self-Regulation: Cognitive-Behavioral Perspectives.'

### **Breaking the stigma**

During a clinical hypnosis induction, a therapist usually instructs a client to relax deeply and then suggests the client experience changes in sensation, perception, thought or behavior corresponding to his or her mental or physical health needs.

Kirsch says he hopes his book on clinical hypnosis, co-edited by Salvador Amigó, Etzel Cardeña and Antonio Capafons, will overturn the negative connotations that have inhibited clinicians from using the powerful clinical tool. Despite the fact that APA, the American Medical Association, the American Psychiatric Association and the American Dental Association all support the use of hypnosis in treatment, many Americans still regard it with apprehension, says Kirsch.

So do many third-party payers. Hypnosis still is considered an alternative therapy that falls outside the mainstream scope of practice, according to a medical director for a large Washington, D.C., health plan who requested anonymity.

'If there are good scientific studies and the public and the employers wanted it, we'd be willing to take a look,' the director said. 'It's not that we're mean-spirited, but we have to prioritize what we pay for, and antibiotics come first.'

Medicare appears to have largely overcome the bias against hypnosis. Since 1992, the federal health insurance program for the elderly and people with disabilities has reimbursed for hypnotherapy. Under code 90880, properly trained psychologists can bill for hypnotherapy when treating such conditions as phobias, psychogenic pain, and conversion and dissociative disorders.

In fact, current **Medicare reimbursement rates are higher for hypnotherapy sessions than for a 45- to 50-minute individual session.** This is due in part to the higher 'work value' assigned to hypnotherapy under Medicaid schemes.

In Chicago, for instance, Frischholz—while encountering some delays in reimbursement that APA helped him eventually resolve—received a higher Medicare reimbursement rate for a single therapy session using hypnosis than for a typical 45- to 50-minute individual psychotherapy session.

### **Hypnosis studies**

According to Gary Neuger, PhD, a Colorado Springs psychologist, health insurers are enthusiastic about clinical studies that confirm how quickly and effectively hypnosis can correct often intractable medical and behavioral problems.

While the success of hypnosis sometimes depends on a patient's ability or willingness to be hypnotized, it has been used effectively in the treatment of obesity, smoking, insomnia, acute and chronic pain, anxiety and depression and during dental and surgical procedures. It also has proven useful in treating such conditions as irritable-bowel syndrome and tension headaches, says a 1996 National Institutes of Health Technology Assessment Panel on Integration of Behavioral and Relaxation Approaches (Journal of the American Medical Association, Vol. 276, No. 4, p. 313–318).

In a 1993 study, more than half of the 226-person study group completely abstained from smoking one week after a single-session habit-restructuring intervention involving self-hypnosis. The participants were taught how to enter self-hypnosis and to use it when they wanted to smoke. Clinicians presented a strategy involving a positive commitment to respect and protect one's body, rather than the conventional strategy of fighting the urge to smoke. Cessation rates at six months climbed to 66 percent for individuals who completed a hypnosis-based treatment program according to research published in the American Journal of Clinical Hypnosis (Vol. 40, No. 2, p. 146–156, 1997).

A major point to make to insurers, says Neuger, is that even relatively modest increases in smoking-cessation rates mean huge health-care savings. The costs directly caused by smoking totaled \$50 billion in 1993, according to the Centers for Disease Control and Prevention. Of that amount, Medicare paid more than \$10 billion and Medicaid more than \$5 billion in tobacco-related health costs.

In pain management, hypnotic suggestions can reduce an individual's perception of pain and anxiety and, as a result, reduce the need for pain medication, says Elvira Lang, MD, a radiologist at the University of Iowa Medical School and recent co-chair of a SCEH/University of Iowa conference on pain management.

### **Alliances with physicians**

Such medical benefits of hypnosis provide an additional argument for psychologists' inclusion on interdisciplinary health-care teams, says Lang, who regularly uses hypnosis during procedures.

Lang and David Spiegel, MD, collaborated on a 1996 pilot study of 30 patients who were trained to use self-hypnosis during invasive medical procedures, which included arteriograms, transcatheter revascularization and a cholecystomy. Spiegel teaches at the Stanford University School of Medicine's Department of Psychiatry and Behavioral Sciences.

Patients were able to self-administer pain medication; four of 16 test patients using self-hypnosis self-administered medication during their procedure, compared with 13 of the 14 control patients. Overall, test patients reported significantly less pain than control patients and fewer interruptions of their procedures. Lang has expanded her inquiry to a 200-patient study funded by the National Institutes of Health's National Institute of Mental Health and its Office of Alternative Medicine.

'When you involve psychologists [using hypnosis] in an integrated treatment approach, there are tremendous costs savings,' Lang says.

'Medicine is headed toward more integrated care practices because it is the most economical approach.'

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