



<u>Payment Policy:</u> Acupuncture Services		
<u>Original Date Approved:</u> 10/26/2017	<u>Effective Date</u> 1/1/2018	<u>Date Revised:</u> 12/23/2019
<u>Scope:</u> Commonwealth Care Alliance (CCA) Product Lines:		
<input checked="" type="checkbox"/> <u>Senior Care Options</u>		
<input checked="" type="checkbox"/> <u>One Care</u>		

PAYMENT POLICY SUMMARY

CCA will cover acupuncture services as medically necessary and will follow guidelines described in 130 CMR 433.000.

Acupuncture: The insertion of metal needles through the skin at certain points on the body, with or without the use of herbs, with or without the application of an electric current, and with or without the application of heat to needles, skin, or both.

REFERRAL/AUTHORIZATION REQUIREMENTS

CCA does not require authorization for the first 36 visits. Visits exceeding that amount will require prior authorization.

PROVIDER REIMBURSEMENT

Provider reimbursement is limited to acupuncture services performed by contracted physicians or other practitioners who are licensed in acupuncture by the Massachusetts Board of Registration in Medicine under 243 CMR: 5.00 (The Practice of Acupuncture) and authorized to perform these services in compliance with the Commonwealth of Massachusetts laws.

Service Limitations:

Acupuncture is reported based on 15-minute increments of personal (face-to-face) contact with the patient, not the duration of acupuncture needle(s) placement. Only one initial code is reported per day (97810 or 97813).

Evaluation and Management services may be reported by a Physician or Advanced Practitioner separately with modifier 25 appended if the patient’s condition requires a significant, separately identifiable E/M service beyond the usual pre-service and post-service work associated with the acupuncture services. The time of the E&M service is not included in the time for the acupuncture service. Providers whose only licensure is as an Acupuncturist may not bill E/M services.



BILLING AND CODING GUIDELINES

Applicable coding is listed below, subject to codes being active on the date of service. The American Medical Association (AMA), Centers for Medicare and Medicaid Services (CMS), and the U.S. Department of Health and Human Services may update codes at different intervals. The list of applicable codes may not be all inclusive.

Coding:

97810	Acupuncture, 1 or more needles; without electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient (97810 cannot be reported in conjunction with 97813)
97811	Acupuncture, 1 or more needles; without electrical stimulation, each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of needle(s) (<i>List separately in addition to code for primary procedure</i>) (97811 can be reported in conjunction with 97810 or 97813)
97813	Acupuncture, 1 or more needles; with electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient (97813 cannot be reported in conjunction with 97810)
97814	Acupuncture, 1 or more needles; with electrical stimulation, each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of needle(s) (<i>List separately in addition to code for primary procedure</i>) (97814 can be reported in conjunction with 97810 or 97813)

AUDIT AND DISCLAIMER INFORMATION

As every claim is unique, the use of this policy is neither a guarantee of payment nor a final prediction of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization and utilization management guidelines when applicable and adherence to plan policies and procedures and claims editing logic. CCA has the right to conduct audits on any provider and/or facility to ensure compliance with the guidelines stated in this payment policy. If such an audit determines that your office/facility did not comply with this payment policy, CCA has the right to expect your office/facility to refund all payments related to non-compliance.

REFERENCES

CMS Website: <http://www.mass.gov/courts/docs/lawlib/116-130cmr/130cmr433.pdf>

CMS The Practice of Acupuncture: <http://www.mass.gov/courts/docs/lawlib/230-249cmr/243cmr5.pdf>

CCA Website: <http://www.commonwealthcarealliance.org/>

Acupuncture Society of Massachusetts: <http://www.aomsm.org/masshealth>



Massachusetts Board of Registration in Medicine:

<http://www.mass.gov/eohhs/docs/borim/acupuncture/regs.pdf>

National Certification Commission for Acupuncture and Oriental Medicine:

<http://www.nccaom.org/state-licensure/>

POLICY TIMELINE DETAILS

1. [October 2017 Drafted](#)
2. [Implemented 1/1/2018](#)
3. [Revised Format, Authorization, Evaluation 8/16/2019](#)
4. [Revised Benefit Limits December 2019](#)