

State Health Plan MA Acupuncture

Applies to:



**Blue Cross
Blue Shield**
of Michigan

A nonprofit corporation and independent licensee
of the Blue Cross and Blue Shield Association

Medicare Plus BlueSM PPO Medicare Plus BlueSM Group PPO Both

Acupuncture

Acupuncture is the technique of inserting thin needles through the skin at specific points on the body to control pain and other symptoms. It is a type of complementary and alternative medicine. Acupuncture may be performed with or without electrical stimulation. Acupuncture is a traditional form of Chinese medical treatment that has been practiced for over 3,000 years.

Treatment involves inserting four to 15 needles at selected acupuncture points for about 10 to 30 minutes. Needles are approximately 37-gauge, stainless steel and disposable. Needles are manipulated with electricity (electroacupuncture), heat or manually.

Original Medicare

Effective for services on or after January 21, 2020, the Centers for Medicare & Medicaid Services will cover acupuncture for chronic low back pain (cLBP) under section 1862(a)(1)(A) of the Social Security Act. Up to 12 visits in 90 days are covered for Medicare beneficiaries under the following circumstances:

For the purpose of this decision, cLBP is defined as:

- Lasting 12 weeks or longer
- Nonspecific, in that it has no identifiable systemic cause (i.e., not associated with metastatic, inflammatory, infectious disease, etc.)
- Not associated with surgery
- Not associated with pregnancy

An additional eight sessions will be covered for those patients demonstrating an improvement. No more than 20 acupuncture treatments may be administered annually. Example: If the first service is performed on March 21, 2020, the next service beginning a new year cannot be performed until March 1, 2021. This means 11 full months must pass from the date of the first service before eligibility begins again.

All other types of acupuncture, including dry needling for any condition other than for cLBP, are not covered by Original Medicare.

Medicare Plus BlueSM Group PPO enhanced benefit for State Health Plan MA

Medicare Plus Blue is a Medicare Advantage plan that provides at least the same level of benefit coverage as Original Medicare (Part A and Part B), and may provide enhanced benefits beyond the scope of Original Medicare within a single health care plan. This flexibility allows Blue Cross to offer enriched plans by using Original Medicare as the base program then adding more options.

Coverage for acupuncture is provided to members under the State Health Plan MA only. Because Original Medicare only covers this service under certain conditions, the group determines the scope of benefits, reimbursement methodology, maximum payment amounts and the member's cost sharing.

Blue Cross Blue Shield of Michigan

bcbsm.com/provider/ma

Policy guidelines

Acupuncture is covered only for the treatment of the following conditions:

- Sciatica
- Neuritis
- Postherpetic neuralgia
- Tic douloureux
- Chronic headaches, such as migraines
- Osteoarthritis
- Rheumatoid arthritis
- Myofascial complaints such as neck and low back pain

Acupuncture is considered not medically necessary when the criteria above are not met, and for any other indication.

Conditions for payment

This table below specifies payment conditions for acupuncture.

Conditions for payment	
Eligible provider	Licensed physician (M.D. or D.O.) or supervised by a licensed physician (M.D. or D.O.)
Payable location	Office or office-like setting
Frequency	20 visits per calendar year maximum
CPT codes	97810, 97811, 97813, 97814
Diagnosis restrictions	Restrictions apply
Age restrictions	No restrictions

Member cost sharing

Acupuncture is covered at 80%, after deductible.

Revision history

Policy Number: MAPPO

Effective: 01/01/2020

Reviewed: 11/20/2020

Revised: 06/02/2020

Updated Original Medicare section. Effective on or after January 21, 2020, the Centers for Medicare & Medicaid Services will cover acupuncture for chronic low back pain (cLBP) under section 1862(a)(1) (A) of the Social Security Act. Up to 12 visits in 90 days are covered for Medicare beneficiaries. Removed reimbursement table from the policy paper, as Medicare rates are effective April 1, 2020.