Audience: All Call Centers Location: Benefits/A-Z List System: N/A Updated: 4.16.24

Reviewed: 4.16.24

Acupuncture

Description

Acupuncture is the traditional Chinese medical practice of the insertion of very thin needles through the skin at strategic points on the body. Acupuncture is a technique for balancing the flow of energy or life force, known as chi or qi (chee). Disruption of this energy flow is thought to cause disease. By applying acupuncture to certain points, it is thought to improve the flow of Qi, thereby improving health. It is most commonly used to treat pain.

See also

Similar, related, or easily confused documents.

- <u>Acupressure</u> Physical pressure is applied to acupuncture points by the hand, elbow, or with various devices.
- <u>Percutaneous Neuromodulation Therapy (PNT) for the Treatment of pain</u> Electrical current applied through needles to stimulate sensory nerves.
- <u>Prolotherapy</u> Injection into an affected ligament to promote inflammation and production of collagen fibers to improve strength.
- <u>Trigger Point Dry Needling</u> Needles are inserted into the skin at identified pain locations.

Table of Contents

The following topics are included in this document:

- Commercial
- Government Programs
- Individual and Family Business (IFB)

Document history

Date	Description
4.16.24	Refreshed for age.
4.11.24	Updated to new template.

Commercial

Introduction

This section applies to all Commercial brands: Dean Health Plan (DHP), Mayo Medical Plan (MMP), Medica (including MHPS), and Prevea360.

Dean (DHP, Prevea360)

Quote Acupuncture benefit under Other Services.

- Limits: Verify visit limits in the member's plan.
- Exclusions: Check plan for exclusions.

Mayo Medical Plan (MMP)

Covered based on place of service. Quote office visit or outpatient hospital benefits.

- Limits: Verify visit limits in the member's plan.
- Exclusions: Check plan for exclusions. Verify acupuncture is not excluded for specific reasons (such as infertility) or when done by an acupuncturist.
- Fertility treatment: When done for fertility treatment, quote infertility treatment benefits.
- **Chiropractor**: Chiropractic benefits apply when done by a chiropractor.
- **Providers**: Any provider, including chiropractors, can bill for acupuncture as long as they have the appropriate training and credentials.

Medica (including MHPS)

Covered based on place of service. Quote office visit or outpatient hospital benefits.

- Limits: Verify visit limits in the member's plan.
- Exclusions: Check plan for exclusions. Verify acupuncture is not excluded for specific reasons (such as fertility) or when done by an acupuncturist.
- Fertility treatment: When done for fertility treatment, quote infertility treatment benefits.
- **Chiropractor**: Chiropractic benefits apply when done by a chiropractor.
 - Chiropractors need to contact OptumHealth Physical Health to arrange for services.
- ACO referrals: Refer to ACO Network Guidelines Chart.
- Elect/Essential referrals: Refer to Elect and Essential Referral Guidelines Chart.
- Providers: Any provider, including chiropractors, can bill for acupuncture as long as they have the appropriate training and credentials.
- ND, SD, and WI: Services from acupuncturists are not eligible.
- Acupuncturists are contracted individually, not by clinic.

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Government Programs

Introduction

This section applies to all Medicaid and Medicare products.

AccessAbility (SNBC),

Medicaid only groups:

• See Medicaid below.

Minnesota Senior Care Plus (MSC+)

Medicare eligible groups:

- Follows Medicare guidelines.
- Medicare is the primary payer.
- If no Medicare eligibility, Medicaid applies. See Medicaid below.

AccessAbility Enhanced (I-SNBC),

- Covered based on place of service. Quote office visit or outpatient hospital benefits.
- **Providers**: Any provider, including chiropractors, can bill for acupuncture as long as they have the appropriate training and credentials.

DUAL (MSHO)

- Acupuncturists are contracted individually, not by clinic.
- Chiropractors need to contact OptumHealth Physical Health to arrange for services
- Exclusions: Not covered to treat the following:
- Cosmetic purposes
- Fertility
- Nicotine addiction
- Limits: Verify visit limits in the member's plan.
- Medica is the only payer.

Cost (Prime)

- Covered up to 12 acupuncture visits in 90 days ONLY for chronic low back pain defined as:
- Lasting 12 weeks or longer
- Having no identifiable systemic cause (not associated with metastatic, inflammatory, or infectious disease)
- Pain that's not associated with surgery or pregnancy
- An additional 8 sessions will be covered if you show improvement.
- If your doctor decides your chronic low back pain isn't improving or is getting worse, then Medicare won't cover your treatments. No more than 20 acupuncture treatments can be given yearly.
- **Providers**: Acupuncture must be given by a doctor, or by another health care provider (ex: nurse practitioner, physician assistant) who has both of these:
- A masters or doctoral level degree in acupuncture or Oriental Medicine from a school accredited by the Accreditation Commission on Acupuncture and Oriental Medicine.
- A current, full, active, and unrestricted license to practice acupuncture in the state where care is being provided.
- Services billed by an acupuncturist are not eligible.
- Chiropractor: If the member sees a chiropractor for these services, the chiropractor bills the services under a supervising physician.
 - If that supervising physician is a primary care provider, the primary office visit copay will apply
- If that supervising physician is a specialist, the specialist office visit copay will apply
- If the chiropractor bills under their own name, the claim will be denied
- If the member meets the coverage guidelines, quote office visit benefits. Quote the appropriate primary care, specialist, or chiropractor cost share based on the provider providing the service.
- Follows Medicare guidelines.

Continued on next page

- Med Advantage Covered up to 12 acupuncture visits in 90 days ONLY for chronic low back pain defined as:
 - Lasting 12 weeks or longer
 - Having no identifiable systemic cause (not associated with metastatic, inflammatory, or infectious disease)
 - Pain that's not associated with surgery or pregnancy
 - An additional 8 sessions will be covered if you show improvement.
 - If your doctor decides your chronic low back pain isn't improving or is getting worse, then Medicare won't cover your treatments. No more than 20 acupuncture treatments can be given yearly.
 - Providers: Acupuncture must be given by a doctor, or by another health care provider (ex: nurse practitioner, physician assistant) who has both of these:
 - A masters or doctoral level degree in acupuncture or Oriental Medicine from a school accredited by the Accreditation Commission on Acupuncture and Oriental Medicine.
 - A current, full, active, and unrestricted license to practice acupuncture in the state where care is being provided.
 - Chiropractor: If the member sees a chiropractor for these services, the chiropractor bills the services under a supervising physician.
 - If that supervising physician is a primary care provider, the primary office visit copay will apply
 - If that supervising physician is a specialist, the specialist office visit copay will apply
 - If the chiropractor bills under their own name, the claim will be denied
 - If the member meets the coverage guidelines, this service is covered under office visit benefits. Quote the appropriate primary care, specialist, or chiropractor cost share based on the provider providing the service.
 - Follows Medicare guidelines.
 - Medica is the only payer.

Med Supp (Select, Signature)

- Covered up to 12 acupuncture visits in 90 days ONLY for chronic low back pain defined as:
 - Lasting 12 weeks or longer
- Having no identifiable systemic cause (not associated with metastatic, inflammatory, or infectious disease)
- Pain that's not associated with surgery or pregnancy
- An additional 8 sessions will be covered if you show improvement.
- If your doctor decides your chronic low back pain isn't improving or is getting worse, then Medicare won't cover your treatments. No more than 20 acupuncture treatments can be given yearly.
- Providers: Acupuncture must be given by a doctor, or by another health care provider (ex: nurse practitioner, physician assistant) who has both of these:
- A masters or doctoral level degree in acupuncture or Oriental Medicine from a school accredited by the Accreditation Commission on Acupuncture and Oriental Medicine.
- A current, full, active, and unrestricted license to practice acupuncture in the state where care is being provided.
- Services billed by an acupuncturist are not eligible.
- If the member meets the coverage guidelines, this service is covered under office visit benefits. Quote the appropriate primary care, specialist, or chiropractor cost share based on the provider providing the service.
- Follows Medicare guidelines.
- Medicare supplement.
- Medicare is the primary payer.

Medicaid

- Covered based on place of service. Quote office visit or outpatient hospital benefits.
- Providers: Any provider, including chiropractors, can bill for acupuncture as long as they have the appropriate training and credentials.
 - Acupuncturists are contracted individually, not by clinic.
- Chiropractors need to contact OptumHealth Physical Health to arrange for services
- Exclusions: Not covered to treat the following:
 - Cosmetic purposes
- Fertility
- Nicotine addiction

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Individual and Family Business (IFB)

Introduction

This section applies to all Individual and Family Business (IFB) brands: Dean Health Plan (DHP), Medica, Medica (formerly WellFirst), and Prevea360.

Benefits

Not covered – contract exclusion.

Document history

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