

## **Corporate Medical Policy**

### **ACUPUNCTURE**

#### **Description of Procedure or Service**

GEHA addresses the use of acupuncture, which is the practice of stimulating specific points on the body using needles for the purpose of treating various health conditions. Manual manipulation or electrical stimulation of the needles may or may not be incorporated into therapy. GEHA provides coverage for up to 20 treatments per calendar year for the treatment of pain and anesthesia only, where each modality used is considered a treatment.

#### **Background**

Acupuncture as a therapeutic intervention is widely practiced in the United States. The general theory of acupuncture is based on the premise that there are patterns of energy flow (Qi) through the body that are essential for health. Disruptions of this flow are believed to be responsible for disease. Acupuncture may correct imbalances of flow at identifiable points close to the skin. Findings from basic research have begun to elucidate the mechanisms of action of acupuncture, including the release of opioids and other peptides in the central nervous system and the periphery and changes in neuroendocrine function.

#### **Regulatory Status**

Acupuncture is a procedure and, as such, is not regulated by the FDA.

However the FDA does regulate the manufacturing and distributing of acupuncture needles as class II medical devices.

#### **Policy Statement**

GEHA will provide coverage for acupuncture when it is determined to be medically necessary because the medical criteria and guidelines as documented below have been demonstrated.

#### **When treatment for Acupuncture is covered for any of the following indications:**

1. Chronic (minimum 12 weeks duration) neck pain; or
2. Chronic (minimum 12 weeks duration) headache; or
3. Low back pain; or
4. Pain from osteoarthritis of the knee or hip (adjunctive therapy); or
5. Post-operative dental pain.

### **When treatment for Acupuncture is not covered:**

1. Maintenance treatment, where the member's symptoms are neither regressing nor improving, is considered not medically necessary. If no clinical benefit is appreciated after four weeks of acupuncture, then the treatment plan should be reevaluated. Further acupuncture treatment is not considered medically necessary if the member does not demonstrate meaningful improvement in symptoms (i.e. measurable functional improvement as compared to the baseline measurements).
2. Acupuncture is considered not medically necessary when the criteria above are not met, and for any other indication.

### **Policy Guidelines**

Benefits are limited to 20 visits per person per calendar year for medically necessary acupuncture treatments for:

- Anesthesia
- Pain relief

Authorizations are concurrent, based on medical necessity, and on-going approval is based on measurable progress towards established treatment goals that are documented in the member's treatment record.

### **Physician Documentation**

Written plan of care that includes:

1. Initial evaluation including description of indication for acupuncture along with date of onset/exacerbation
2. Description of short and long term goals that are specific, measurable, realistic, and time bound
3. The acupuncture treatment to be used along with the frequency and planned duration.
4. Ongoing treatment requests should include documentation of progress towards treatment goals.

Applicable codes include but are not limited to:

97810 Acupuncture, 1 or more needles; without electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient

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)

97813 Acupuncture, 1 or more needles; with electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient

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)

S8930 Electrical stimulation of auricular acupuncture points; each 15 minutes of personal one-on-one contact with the patient

## **Scientific references**

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### **Policy implementation and updates**

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| 12/2017 | Revised coverage criteria with clarity regarding covered and non-covered indications. |
| 11/2018 | Revised coverage criteria to align parallel with the member's benefit brochure.       |