



## Acupuncture

Last Revision/Review Date: July 18, 2018

P&P # C.6.31

### A. Documentation Required:

To facilitate the authorization process, referral requests must include the following:

1. Treatment plan from a licensed participating acupuncture provider; **OR**
2. A licensed physician, physician assistant, or other provider who is allowed to practice acupuncture as part of their state professional license who has completed an accredited acupuncture training program of at least 200 hours training specifically in acupuncture and the program is accredited by the National Accreditation Commission for Schools and Colleges of Acupuncture and Oriental Medicine (NACSCAOM) or the [National Certification Commission for Acupuncture and Oriental Medicine](#) (NCCAOM); **AND**
3. Assessment by the acupuncture treatment provider including previous treatment history and the expected acupuncture treatment plan.

### B. Criteria for Medical Necessity of Initial Acupuncture Treatment:

1. Up to six (6) initial acupuncture visits are considered medically necessary for the treatment of nausea and vomiting associated with pregnancy or nausea and vomiting associated with chemotherapy if **All** the following criteria are met:
  - a. Nausea and vomiting is refractory to standard medication therapy; **AND**
  - b. Evaluation and referral by a physician with expertise in management of the patient's condition (e.g., pregnancy or cancer); **AND**
  - c. Assessment from the acupuncture treatment provider and the expected acupuncture treatment plan.
2. Up to six (6) initial acupuncture visits are considered medically necessary as an adjunct to standard conservative therapy (e.g., PT/OT, medication, application of heat or cold, etc. as applicable for the condition) for **ANY** of the following chronic (defined as pain lasting longer than 6 weeks) conditions:
  - a. Migraine or tension headache;
  - b. Osteoarthritic knee pain;
  - c. Myofascial pain;
  - d. Neck pain;
  - e. Low back pain;
  - f. Fibromyalgia;

When **ALL** the following criteria are met:

- a. Pain is refractory to standard medication therapy or the member has contraindications or side effects to medications; **AND**
- b. Pain has resulted in impaired activities of daily living; **AND**

- c. There is reasonable expectation that treatment will result in significant improvement over a clearly defined period of time; **AND**
- d. Patient has had an evaluation by a primary care physician, neurologist, rheumatologist or pain management specialist.

**C. Criteria for Medical Necessity of Continuation of Acupuncture Treatment:**

Up to six (6) additional acupuncture visits are considered medically necessary if the member demonstrates meaningful improvement in symptoms for the approved conditions noted above.

**D. Indications Considered Experimental, Investigational or not Medically Necessary (Not an all-inclusive list):**

- 1. Additional acupuncture treatments beyond the initial 6 visits if the patient does not demonstrate meaningful improvement in symptoms;
- 2. Maintenance or long-term treatment where the member's symptoms are neither regressing nor improving;
- 3. Acupuncture for any indication not listed above;
- 4. Acupuncture for treatment of postoperative symptom management.

**CPT CODES:**

97810	Acupuncture, 1 or more needles; without electrical stimulation, initial 15 minutes of personal one-on-one contact with patient
97811	Without electrical stimulation, each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of needle(s).
97813	With electrical stimulation, initial 15 minutes of personal one-on-one contact with patient.
97814	With electrical stimulation, each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of needle(s)

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Acupuncture for Treatment of Neck and Shoulder Pain  
Dec 27, 2010 **Latest Update Search:** January 15, 2013

Acupuncture for Treatment of Low Back Pain  
Oct 21, 2010 **Latest Update Search:** October 3, 2012