



Acupuncture

Reimbursement Policy ID: RPC.0018.6400

Recent review date: 01/2024

Next review date: 02/2025

AmeriHealth Caritas Florida reimbursement policies and their resulting edits are based on guidelines from established industry sources, such as the Centers for Medicare and Medicaid Services (CMS), the American Medical Association (AMA), state and federal regulatory agencies, and medical specialty professional societies. Reimbursement policies are intended as a general reference and do not constitute a contract or other guarantee of payment. AmeriHealth Caritas Florida may use reasonable discretion in interpreting and applying its policies to services provided in a particular case and may modify its policies at any time.

In making claim payment determinations, the health plan also uses coding terminology and methodologies based on accepted industry standards, including Current Procedural Terminology (CPT); the Healthcare Common Procedure Coding System (HCPCS); and the International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM), and other relevant sources. Other factors that may affect payment include medical record documentation, legislative or regulatory mandates, a provider's contract, a member's eligibility in receiving covered services, submission of clean claims, and other health plan policies, and other relevant factors. These factors may supplement, modify, or in some cases supersede reimbursement policies.

This reimbursement policy applies to all health care services billed on a CMS-1500 form or its electronic equivalent, or when billed on a UB-04 form or its electronic equivalent.

Policy Overview

This policy describes reimbursement of claims for acupuncture services.

Exceptions

N/A

Reimbursement Guidelines

Acupuncture is defined as a form of alternative medicine in which thin needles are inserted into strategic points on the body, most commonly used to treat pain. Acupuncture services are covered only for the following conditions: acute and chronic pain. Acupuncture is covered for members 21 years of age and older.

Reimbursement for covered acupuncture services may be made to eligible providers. Providers must submit clean claims, consistent with Florida and industry-recognized billing guidelines, using appropriate codes and modifiers. Up to [12] visits per benefit year are allowed without prior authorization. Services must be medically necessary.

The ranges of procedure codes for acupuncture services are Current Procedural Terminology (CPT) 97810-97814:

CPT code	Description
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) (List separately in addition to code for primary procedure)
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) (List separately in addition to code for primary procedure)

Refer to CPT/HCPCS manuals for complete descriptions of procedure codes and their modifiers, and to the ICD-10-CM manual for guidelines and descriptions of diagnoses and other conditions. Refer to AmeriHealth Caritas Florida billing resources for fee schedules and billing guidelines.

Definitions

Acupuncture

Acupuncture is the technique of inserting thin needles through the skin at specific points on the body to control pain and other symptoms.

Edit Sources

- I. Current Procedural Terminology (CPT) and associated publications and services.
- II. International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10).
- III. Healthcare Common Procedure Coding System (HCPCS).
- IV. Centers for Medicare and Medicaid Services (CMS).
- V. The National Correct Coding Initiative (NCCI)
- VI. Coding guidelines from specialty societies [e.g., American Society for Radiation Oncology (ASTRO), American Academy of Pediatrics (AAP), American College of Obstetricians and Gynecologists (ACOG), American Academy of Family Practitioners (AAFP)].
- VII. Corresponding AmeriHealth Caritas Florida Clinical Policies.
- VIII. Florida Medicaid Fee Schedule(s).

Attachments

N/A

Associated Policies

N/A

Policy History

04/2024	Revised preamble
01/2024	Reimbursement Policy Committee Approval
08/2023	Removal of policy implemented by AmeriHealth Caritas Florida from Policy History section
01/2023	Template revised <ul style="list-style-type: none">• Revised preamble• Removal of Applicable Claim Types table• Coding section renamed to Reimbursement Guidelines• Added Associated Policies section
11/2022	Reimbursement Policy Committee Approval