

Acupuncture Payment Policy

Applies to the following Tufts Health Plan products:

- Tufts Health Plan Commercial (including Tufts Health Freedom Plan)¹
- Tufts Medicare Preferred HMO (a Medicare Advantage product)
- Tufts Health Plan Senior Care Options (SCO) (a dual-eligible product)

Applies to the following Tufts Health Public Plans products:

- Tufts Health Direct (a Massachusetts Qualified Health Plan (QHP) (a commercial product)
- Tufts Health Together (a MassHealth MCO Plan and Accountable Care Partnership Plan)
- Tufts Health RITogether (a Rhode Island Medicaid Plan)
- Tufts Health Unify – (OneCare Plan; a dual-eligible product)

The following payment policy applies to Tufts Health Plan contracting physicians and practitioners licensed to practice acupuncture in the state which they practice.

In addition to the specific information contained here, providers must adhere to the policy information outlined in the [Professional Services and Facilities Payment Policy](#).

Note: Audit and disclaimer information is located at the end of this document.

POLICY

Tufts Health Plan covers medically necessary acupuncture services, in accordance with the member's benefits.

GENERAL BENEFIT INFORMATION

Services and subsequent payment are pursuant to the member's benefit plan document. Member eligibility and benefit specifics should be verified prior to initiating services by logging on to the secure Provider [website](#) or by contacting [Provider Services](#).

Note: There is no member responsibility for covered services for Tufts Health Plan SCO members, Tufts Health Unify, Tufts Health Together or Tufts Health RITogether members.

Commercial Products

Commercial members are covered for medically necessary acupuncture services² except for adjunctive therapies (e.g., moxibustion, herbs, oriental massage) or as an anesthetic in lieu of or in conjunction with conventional surgical anesthesia. Precious metal needles (e.g., gold, silver) are not covered.

Tufts Health Plan SCO

Tufts Health Plan SCO members may receive acupuncture for the services listed below.

Acupuncture for Pain Management

As described in 130 CMR 433.440(C), members are covered for a total of 20 sessions of acupuncture for the treatment of pain per member per plan year without prior authorization. Refer to the Authorization/Notification Requirements section below for additional prior authorization requirements for Tufts Health Plan SCO members.

Acupuncture as an Anesthetic

Members are covered for acupuncture as a substitute for conventional surgical anesthesia as described in [130 CMR 433.454\(C\)](#).

¹ Commercial products include HMO, POS, PPO, Tufts Health Freedom Plan, and CareLinkSM when Tufts Health Plan is the primary administrator.

² [Massachusetts Division of Insurance \(DOI\) Bulletin 2019-06](#) and R.I.G.L. [§27-41-57](#).

Acupuncture Detoxification

Tufts Health Plan SCO provides acupuncture detoxification³ coverage for up to six treatments per week for the first two weeks and up to three treatments per week thereafter, as described in [103 CMR 418.406\(C\)\(3\)](#). For coverage, each session must last at least 45 minutes but no more than 60 minutes. Prior to services, members must be screened by a nurse practitioner, physician assistant, or registered nurse to rule out medical contraindication.

Tufts Health Direct

Members are covered for up to 30 acupuncture medical visits per benefit year. There is no limit for behavioral health treatment.

Tufts Health Together and Tufts Health Unify

Acupuncture may be used as an ancillary treatment during detoxification or post-detoxification and the treatment of pain. There is no visit limit.

Tufts Health RITogether

Members are covered for acupuncture services for the treatment of pain. There is no visit limit.

For additional information on Acupuncture Detoxification for Tufts Health Public Plans refer to the [Behavioral Health – Acupuncture Detoxification Level of Care](#) medical necessity guidelines.

AUTHORIZATION/NOTIFICATION REQUIREMENTS

Certain procedures, items and/or services may require prior authorization with the Tufts Health Plan Precertification Operations Department. Requirements for prior authorization include timely inpatient notification and submission of all required documentation. While you may not be the provider responsible for obtaining prior authorization, as a condition of payment you must confirm that prior authorization has been obtained.

Commercial Products and Tufts Health Public Plans

No referrals or prior authorizations are needed for acupuncture services.

Tufts Health Plan SCO

Acupuncture for Pain Management

Members are covered for 20 visits per plan year without prior authorization. If the member's condition, treatment or diagnosis changes beyond the initial 20 visits, providers must fax clinical information and documentation supporting medical necessity to the Tufts Health Plan Precertification Operations Department at 617.972.9409.

Acupuncture as an Anesthetic

Acupuncture anesthetic services rendered as part of an inpatient stay are subject to inpatient notification requirements, as outlined in the [Senior Products Provider Manual](#).

Acupuncture Detoxification

Prior authorization is not required for acupuncture services.

BILLING INSTRUCTIONS

Unless otherwise stated, Tufts Health Plan follows AMA coding guidelines. Refer to current industry standard coding guidelines for a complete list of ICD, CPT/HCPCS, revenue codes, modifiers and their usage. For more information refer to the [Professional Services and Facilities Payment Policy](#).

Report any significant, separately identifiable evaluation and management (E&M) services with modifier 25 if the member's condition requires service above and beyond pre- or post-service work associated with acupuncture services. Refer to the [Modifier Payment Policy](#) for additional information.

COMPENSATION/REIMBURSEMENT INFORMATION

Providers are compensated according to the applicable network contracted rates, regardless of the address where the service is rendered. For additional information, refer to the [Professional Services and Facilities Payment Policy](#).

ADDITIONAL RESOURCES

[130 CMR 433.000](#): Physician Services

[130 CMR 418.000](#): Substance Abuse Treatment Services

³ 103 CMR 418.402

[Behavioral Health – Acupuncture Detoxification Level of Care](#) medical necessity guidelines
[Massachusetts Division of Insurance Bulletin 2019-06](#)
R.I.G.L. §[27-41-57](#)

DOCUMENT HISTORY

- January 2019: Reviewed by Committee; added Tufts Health Public Plans and Commercial content
- June 2018: Template updates
- April 2018: Document created

AUDIT AND DISCLAIMER INFORMATION

Tufts Health Plan reserves the right to conduct audits on any provider and/or facility to ensure compliance with the guidelines stated in this payment policy. If such an audit determines that an office/facility did not comply with this payment policy, Tufts Health Plan will expect the office/facility to refund all payments related to noncompliance. For more information about Tufts Health Plan's [audit policies](#), refer to the Provider website.

This policy provides information on Tufts Health Plan claims adjudication processes. As every claim is unique, this policy is neither a guarantee of payment, nor a final indication of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization and utilization management requirements (when applicable), adherence to plan policies and procedures, and claims editing logic. An authorization is not a guarantee of payment. Claims for services subject to authorization may be reviewed for accuracy and compliance with payment policies.

This policy applies to the Tufts Health Plan products, as identified in the checkboxes on the first page, and to CareLinkSM for providers in Massachusetts and Rhode Island service areas. Providers in the New Hampshire service area are subject to Cigna's provider agreements with respect to CareLink members. This policy does not apply to the Private Health Care Systems (PHCS) network (also known as Multiplan). Tufts Health Plan reserves the right to amend a payment policy at its discretion.