


# PEIA



## PEIA PPB Reimbursement Policy

**Subject:** Acupuncture  
**Date:** April 6, 2006  
**Written:** November 7, 2002  
**Revised:** June 9, 2004  
**Revised:** April 22, 2005 (added July 2005 CPT Codes)  
**Revised:** April 6, 2006 (added January 2006 fee allowances)

### Signatures:

  
B. Keith Huffman  
Acting Co-Director/General Counsel

04/06/2006  
Date

  
Gloria Long  
Acting Co-Director/Deputy Director for Insurance  
Programs & Services

04/06/2006  
Date

  
J.A. Haught, CPA  
Acting Co-Director/Chief Financial Officer

04/06/2006  
Date

### Purpose:

Benefits are available under the PEIA PPB benefit plan for acupuncture services. To be covered under this Plan, these services must meet the standards of practice of acupuncture as established by the West Virginia Board of Acupuncture.

**PEIA PPB Reimbursement Policy - Acupuncture**  
**Page Two**  
**April 6, 2006**

**Effective Date:**

The effective date of this policy and acupuncture services is July 1, 2002. Prior to this date, acupuncture services were not covered by this Plan. The purpose of the revision of June 9, 2004, was to change the benefit maximum for the new Plan Year (FY 2005) from \$1,000 to 20 visits.

**Benefit Maximums:**

As of July 1, 2005, acupuncture services are applied toward the 20 visit annual benefit maximum for outpatient therapy services. For the period of July 1, 2002 through June 30, 2004, acupuncture services were applied the \$1,000 outpatient therapy maximum. Services included in the outpatient therapy benefit maximum are:

- ❖ physical,
- ❖ occupational,
- ❖ massage,
- ❖ vision therapy,
- ❖ speech therapy,
- ❖ chiropractic services and
- ❖ acupuncture services.

The 20 visit benefit limit is a per member per plan year maximum. For extreme medical conditions, coverage may be extended beyond this 20 visit limit when medical documentation is provided to the case manager. Generally, these are patients already in catastrophic case management by the third party administrator.

**Coverage:**

Medically necessary acupuncture services that meet Plan guidelines are covered at 80% for in-network providers after the deductible is met. Out-of-network services are covered at 60% after the out-of-network deductible is met. Office visits for covered services require a \$15.00 co-payment for in-network services.

**Requirements for Coverage:**

Acupuncture services must be provided by a licensed acupuncturist in accordance with the minimum standards of practice for acupuncture as established by the West Virginia Board of Acupuncture. You will find the details of these standards on the West Virginia Board of Acupuncture's website at <http://www.wvs.state.wv.us/acupuncture/>. Prior to receiving payment, each provider must submit a copy of his or her WV acupuncture license to Acordia.

**PEIA PPB Reimbursement Policy - Acupuncture**  
**Page Three**  
**April 6, 2006**

**Billing for Services:**

Providers must follow PEIA billing procedures and guidelines for PEIA PPB Plan members. Claims may be submitted on paper (CMS1500 claim form) or electronically. Electronic submissions are preferred.

**Prohibition of Balance Billing**

The PEIA PPB Plan is governed in part by the Omnibus Health Care Act, which was enacted by the West Virginia Legislature in April 1989. This Law requires that any West Virginia health care provider who treats a PEIA PPB Plan participant must accept assignment of benefits and cannot balance bill the participant for any portion of charges over and above the PEIA fee allowance or for any discount amount applied to a provider's charge or payment. This is known as the "prohibition of balance billing". The prohibition of balance billing applies when services are provided in West Virginia and when the PEIA PPB Plan is the primary payer. When the PPB Plan is the secondary payer, the provider may bill the patient for disallowed amounts and for the provider discounts. The patient is always responsible for deductible, co-payment, coinsurance amounts and for non-covered services.

**Billing Codes:**

PEIA reimburses professional services according to a Resource Based Relative Value Scale (RBRVS) fee schedule. The payment system sets fees for professional medical services based on the relative amounts of work, practice, and malpractice insurance expense involved.

For Acupuncture services, CPT codes 97810, 97811, 97813 and 97814 are accepted.

Other CPT codes that are considered within the scope and training of acupuncturists licensed by the WV Board of Acupuncture include:

- 99201 – 99215 Evaluation and Management Services (office)
- 99241 – 99245 Consultations (office)
- 99391 – 99429 Preventive Medicine Services (office)
- 64550 – 64565 Application Neurostimulator
- 80048 – 89356 Pathology and Laboratory Services
- 90281 - 90779 Immunizations and Injections
- 97001 – 98943 Physical Medicine Services

**Reimbursement:**

PEIA's RBRVS reimbursement schedule is the basis for provider reimbursement of acupuncture services and for the other services listed above with the exception of the laboratory services. Laboratory services are paid under PEIA's clinical lab fee schedule. Both of the reimbursement schedules are found on the website at [www.wvpeia.com](http://www.wvpeia.com). Reimbursement for acupuncture is as follows:

**PEIA PPB Reimbursement Policy - Acupuncture**  
**Page Four**  
**April 6, 2006**

<b>CPT Code</b>	<b>PEIA Allowance</b>	<b>CPT Code Description (Prior to July 2005)</b>
97780	\$30.50	Acupuncture, one or more needles; without electrical stimulation
97781	\$40.00	Acupuncture, one or more needles; with electrical stimulation
<b>CPT Code</b>	<b>PEIA Allowance</b>	<b>CPT Code Description Effective July 1, 2005</b>
97810	\$30.57	Acupuncture, one or more needles; without electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient
97811	\$26.36	Each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of needle(s)
97813	\$32.68	Acupuncture, one or more needles; with electrical stimulation
97814	\$28.46	Each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of needles(s)
<b>CPT Code</b>	<b>PEIA Allowance</b>	<b>CPT Code Description Effective January 1, 2006</b>
97810	\$43.85	Acupuncture, one or more needles; without electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient
97811	\$35.11	Each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of needle(s)
97813	\$46.65	Acupuncture, one or more needles; with electrical stimulation
97814	\$38.96	Each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of needles(s)

**Inquiries:**

Questions regarding this policy should be directed to Acordia at (888) 440-7342.