# Acupuncture and Chiropractic Services

## Supplement to Your Blue Shield

**Access+ HMO EOC**

## Summary of Benefits

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Member Copayment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Covered Services as described in this Supplement and authorized by American Specialty Health Plans of California, Inc. (ASH Plans)</td>
<td></td>
</tr>
<tr>
<td><strong>Acupuncture Services</strong></td>
<td></td>
</tr>
<tr>
<td>Office Visit</td>
<td>$10 per visit up to a maximum of 30 visits per Calendar Year¹</td>
</tr>
<tr>
<td><strong>Chiropractic Services</strong></td>
<td></td>
</tr>
<tr>
<td>Office Visit</td>
<td>$10 per visit up to a maximum of 30 visits per Calendar Year¹</td>
</tr>
<tr>
<td><strong>Benefit</strong></td>
<td><strong>Maximum Blue Shield Payment</strong></td>
</tr>
<tr>
<td>Chiropractic Appliances</td>
<td>$50 per Calendar Year²</td>
</tr>
</tbody>
</table>

¹ The 30 visits maximum is a per Member per Calendar Year maximum for all chiropractic and acupuncture Services combined.

² Member is responsible for all charges above the maximum payment indicated.

## Introduction

In addition to the Benefits listed in your EOC, your Plan provides coverage for acupuncture and chiropractic Services as described in this Supplement.

## Benefits

### Acupuncture Services

Benefits are provided for Medically Necessary acupuncture Services up to the maximum visits* per Calendar Year as shown on the Summary of Benefits for acupuncture care when received from an American Specialty Health Plans of California, Inc. (ASH Plans) Participating Provider. This Benefit includes an initial examination and subsequent office visits and acupuncture Services specifically for the treatment of Neuromusculo-skeletal Disorders, Nausea and Pain, as authorized by ASH Plans up to the Benefit maximum specified above. Acupuncture Services that are Covered Services include but are not limited to the treatment of carpal tunnel syndrome, headaches, menstrual cramps, osteoarthritis, stroke rehabilitation, and tennis elbow. Covered Services do not include services for treatment of asthma or addiction (including without limitation, smoking cessation). Covered Services also do not include vitamins, minerals, nutritional supplements (including herbal supplements) or other similar products.

*Note: The acupuncture Services visit maximum is a combined maximum with the chiropractic Services maximum.

### Chiropractic Services

Benefits are provided for Medically Necessary chiropractic Services up to the maximum visits* per Calendar Year as shown on the Summary of Benefits for routine chiropractic care when received from an ASH Plans Participating Provider. This Benefit includes an initial examination and subsequent office visits, adjustments, and conjunctive therapy specifically for the treatment of Neuromusculo-skeletal Disorders as authorized by ASH Plans up to the Benefit maximum specified above. Benefits are also provided for X-rays.

Chiropractic appliances are covered up to the maximum in a Calendar Year as shown on the Summary of Benefits as authorized by ASH Plans.

You will be referred to your Personal Physician for evaluation of conditions not related to a Neuromusculo-
skeletal Disorder, and for evaluation for non-covered services such as diagnostic scanning (CAT Scans or MRIs).

*Note: The chiropractic Services visit maximum is a combined maximum with the acupuncture Services maximum.

These chiropractic and acupuncture Benefits as described above are separate from your health plan; however, the general provisions, limitations and exclusions described in your EOC do apply. A referral from a Member’s physician is not required. All Covered Services must be prior authorized by ASH Plans, except for (1) the Medically Necessary initial examination and treatment by a Participating Provider; and, (2) Emergency Services.

NOTE: ASH Plans will respond to all requests for prior authorization within 5 business days from receipt of the request.

Services provided by Non-Participating Providers will not be covered except for Emergency Services and in certain circumstances, in counties in California in which there are no Participating Providers. A Non-Participating Provider is an acupuncturist or chiropractor who has not entered into an agreement with ASH Plans to provide Covered Services to Members.

If you have questions, you may call the ASH Plans Member Services Department at 1-800-678-9133, or write to: American Specialty Health Plans of California, Inc., P.O. Box 509002, San Diego, CA 92150-9002.

Note: Members should exhaust the Covered Services (Benefits) listed and obtained through this Supplement before accessing and utilizing the same services through the “Alternative Care Discount Program”. (Members may access the following web site for information on the Wellness Discount Programs: http://www.blueshieldca.com.)

**Member Services**

For all acupuncture and chiropractic Services, Blue Shield of California has contracted with ASH Plans to act as the Plan’s acupuncture and chiropractic Services administrator. ASH Plans should be contacted for questions about acupuncture and chiropractic Services, ASH Plans Participating Providers, or acupuncture and chiropractic Benefits. You may contact ASH Plans at the telephone number or address which appear below:

1-800-678-9133
American Specialty Health Plans of California, Inc.
P.O. Box 509002
San Diego, CA 92150-9002

ASH Plans can answer many questions over the telephone.

**Grievance Process**

Members may contact the Blue Shield Member Services Department by telephone, letter or on-line to request a review of an initial determination concerning a claim or service. Members may contact the Plan at the telephone number as noted in the back of your EOC booklet. If the telephone inquiry to Member Services does not resolve the question or issue to the Member’s satisfaction, the Member may request a grievance at that time, which the Member Services Representative will initiate on the Member’s behalf.

The Member may also initiate a grievance by submitting a letter or a completed “Grievance Form”. The Member may request this Form from Member Services. The completed form should be submitted to Member Services at the address as noted in the back of your EOC booklet. The Member may also submit the grievance online by visiting our web site at http://www.blueshieldca.com.

Blue Shield will acknowledge receipt of a grievance within 5 calendar days. Grievances are resolved within 30 days. The grievance system allows Members to file grievances for at least 180 days following any incident or action that is the subject of the Member’s dissatisfaction. See the following paragraph for information on the expedited decision process.

Note: Blue Shield of California has established a procedure for our Members to request an expedited decision. A Member, Physician, or representative of a Member may request an expedited decision when the routine decision making process might seriously jeopardize the life or health of a Member, or when the Member is experiencing severe pain. Blue Shield shall make a decision and notify the Member and Physician within 72 hours following the receipt of the request. An expedited decision may involve admissions, continued stay, or other healthcare services. If you would like additional information regarding the expedited decision process, or if you believe your particular situation qualifies for an expedited decision, please contact Blue Shield of California’s Member Services Department at the number provided in the back of your EOC booklet.

NOTE: If your employer’s health plan is governed by the Employee Retirement Income Security Act (“ERISA”), you may have the right to bring a civil action under Section 502(a) of ERISA if all required reviews of your claim have been completed and your claim has not been approved.

**Definitions**

**American Specialty Health Plans of California, Inc. (ASH Plans)** – ASH Plans is a licensed, specialized health care service plan that has entered into an agreement with Blue Shield of California to arrange for the delivery of acupuncture and chiropractic Services.
Nausea – an unpleasant sensation in the abdominal region associated with the desire to vomit that may be appropriately treated by a Participating acupuncturist in accordance with professionally recognized standards of practice and includes adult post-operative Nausea and vomiting, and Nausea of pregnancy.

Neuromusculo-skeletal Disorders – conditions with associated signs and symptoms related to the nervous, muscular, and/or skeletal systems. Neuromusculo-skeletal Disorders are conditions typically categorized as structural, degenerative or inflammatory disorders, or biomechanical dysfunction of the joints of the body and/or related components of the motor unit (muscles, tendons, fascia, nerves, ligaments/capsules, discs, and synovial structures) and related to neurological manifestations or conditions.

Pain – a sensation of hurting or strong discomfort in some part of the body caused by an injury, illness, disease, functional disorder or condition. Pain includes low back Pain, post-operative Pain and post-operative dental Pain.

Participating Provider – a Participating chiropractor, Participating acupuncturist or other licensed health care provider under contract with ASH Plans to provide Covered Services to Members.

Please be sure to retain this document. It is not a contract but is a part of your Blue Shield Access+ HMO EOC.