Acupuncture and Chiropractic Services (Optional Benefits)

Benefit Coverage

Medically necessary acupuncture services are covered up to the maximum visits* per calendar year when provided by an American Specialty Health Plans, Inc. (ASH Plans) participating provider. This benefit includes an initial examination and acupuncture services specifically for the treatment of neuromusculoskeletal disorders, nausea, and pain, and must be determined as medically necessary by ASH Plans.

Medically necessary chiropractic services are covered up to the maximum visits* per calendar year for routine chiropractic care when provided by an ASH Plans participating provider. This benefit includes an initial examination and chiropractic adjustments, and conjunctive therapy specifically for the treatment of neuromusculoskeletal disorders and must be determined as medically necessary by ASH Plans. Benefits are also provided for pre-authorized x-rays.

**Note*: The two standard HMO plan designs are Acupuncture and Chiropractic Services with a combined maximum of 30 visits per calendar year with a $10 copay on standard HMO plans or a maximum of 30 chiropractic only visits per calendar year with a $10 copay. Some HMO plans may have separate acupuncture and chiropractic maximum visit limits. The number of visits may vary. Refer to member's EOC for details or call ASH Plans at (800) 678-9133.

Copayment

See the members' *Evidence of Coverage* (EOC) and *Summary of Benefits and Coverage* for member copayments.

Acupuncture and Chiropractic Services (Optional Benefits)

Benefit Exclusions

Covered services do not include:

- Services administered by an acupuncturist or chiropractor not in the ASH Plans network
- Acupuncture treatment for services for treatment of asthma
- Acupuncture treatment for addiction (including without limitation, smoking cessation)
- Vitamins, minerals, nutritional supplements (including herbal supplements), or similar products
- Hypnotherapy, behavior training, sleep therapy, and weight programs
- Treatment of service for pre-employment physicals
- Services, laboratory tests, x-rays, and other treatment classified as experimental or investigational, or in the research stage
- Services for examination and/or treatment of strictly non-musculoskeletal disorders
- Massage therapy provided by a massage therapist
- Vocational rehabilitation
- Thermography
- Air conditioners, air purifiers, mattresses, supplies or any other similar devices or appliances
- Transportation costs including local ambulance charges
- Education programs, non-medical self-care, or self-help training, or any related diagnostic testing
- Any treatment or service caused by or arising out of the course of employment or covered under any public liability insurance
- MRI, CAT scans, bone scans, nuclear radiology, and/or other types of diagnostic radiology, other than plain film studies
- Hospitalization, anesthesia, manipulation under anesthesia, or other related services

Acupuncture and Chiropractic Services (Optional Benefits)

Benefit Limitations

- Refer to the member's EOC for benefit details including the copayment and if the member has chiropractic only, or chiropractic and acupuncture combined, or chiropractic and acupuncture separate, and the maximum number of annual visits or call ASH Plans at (800) 678-9133
- Chiropractic appliances are covered up to a maximum of $50.00 in a calendar year as authorized by ASH Plans
- Acupuncture services are limited to neuromusculoskeletal disorders, nausea, and pain as authorized by ASH Plans
- Chiropractic services are limited to neuromusculoskeletal disorders of the spine, neck, and joints

Exceptions

Emergency services by a non-ASH Plans provider will be covered. Under certain circumstances in California counties without ASH Plans participating providers, other services by non-ASH Plans providers may be covered as well.

Examples of Covered Services

- Initial examination and office visits
- Acupuncture services for carpal tunnel syndrome or tennis elbow
- Acupuncture services for headaches
- Acupuncture services for menstrual cramps
- Acupuncture services for osteoarthritis or stroke rehabilitation
- Spinal manipulation or adjustments
- Adjunctive therapy
- Radiology procedures involving the spine and extremities
- Chiropractic appliances

Acupuncture and Chiropractic Services (Optional Benefits)

Examples of Non-Covered Services

- Vitamins, minerals, nutritional supplements (including herbal supplements)
- Acupuncture treatment for asthma or smoking addiction
- Treatment for cancer
- Hypnotherapy
- Diagnostic scanning (MRI or CAT scans) and diagnostic ultrasound

References

Combined Evidence of Coverage and Disclosure Form

HMO Access+ Evidence of Coverage

Local Access+ HMO Evidence of Coverage