

COMPLEMENTARY AND ALTERNATIVE MEDICINE (CAM) BY LINE OF BUSINESS			
	MASSAGE * see below	CHIROPRACTIC	ACUPUNCTURE* see below
COMMERCIAL			
Is it a benefit?	Massage is not a covered benefit. See "In Lieu of" for additional information on massage therapy.	Yes	Yes
Criteria to receive benefit		See Chiropractic Services Clinical Medical Policy	See Acupuncture Clinical Medical Policy
Exclusions		See Chiropractic Services Clinical Medical Policy	See Acupuncture Clinical Medical Policy
Authorization Type		Other Professional Services	Other Professional Services
Codes		CPT Codes: 98940-98942	CPT Codes: 97810-97814
Units		1 visit = 4 units	1 visit = 4 units
Benefit Maximum		12 visits per plan year* (See "exclusion" notes on CMP)	12 visits per plan year*
INTEGRITY (MMP)			
Is it a benefit?	Massage is not a covered benefit. See "In Lieu of" for additional information on massage therapy.	Yes	Acupuncture is not a covered benefit. See "In Lieu of" for additional information on acupuncture.
Process		Use "General Auth" prior authorization form or	
		"General Auth eForm" on nhpri.org	
Criteria to receive benefit		See Chiropractic Services Clinical Medical Policy	
Exclusions		See Chiropractic Services Clinical Medical Policy	
Authorization Type		Other Professional Services	
Codes		CPT Codes: 98940-98942	
Units		1 visit = 4 units	
Benefit Maximum		Limited to not more than one treatment per	
		day. No annual Limit.	
MEDICAID MEDICAID			
Is it a benefit?	Massage is not a covered benefit. See "In Lieu of" for additional information on massage therapy.	Yes	Yes
Process		Use "General Auth" prior authorization form or	Use "General Auth" prior authorization form or
		"General Auth eForm" on nhpri.org	"General Auth eForm" on nhpri.org
Criteria to receive benefit		See Chiropractic Services Clinical Medical Policy	See Acupuncture Clinical Medical Policy
Exclusions		See Chiropractic Services Clinical Medical Policy	See Acupuncture Clinical Medical Policy
Referral Category		Chiropractic Services (Referral)	Acupuncture Services (Referral)
Authorization Type		Other Professional Services	Other Professional Services
Codes		CPT Codes: 98940-98942	CPT Codes: 97810-97814
Units		1 visit = 4 units	1 visit = 4 units
Benefit Maximum		Limited to 12 visits per rolling year**.	Limited to 12 visits per rolling year**.

^{*}Plan Year = A period of 12 consecutive months beginning with the effective date of the contract year of the member. Individual Exchange members generally align with calendar year. Small Group Exchange members may have varying month effective dates based. Contact provider services for the most up to date information.

^{**}Rolling Year = A period of 12 consecutive months beginning with the initiated treatment.