

IMPORTANT NOTE ABOUT THIS REIMBURSEMENT POLICY

Providers are responsible for submission of accurate claims requests. This reimbursement policy is intended to ensure that you are reimbursed based on the code that correctly describes the procedure performed. This and other reimbursement policies may use CPT, CMS or other coding methodologies from time to time. References to CPT or other sources are for definitional purposes only and do not imply any right to reimbursement.

Coding methodology, clinical rationale, industry-standard reimbursement logic, regulatory issues, business issues and other input is considered in developing reimbursement policy.

This information is intended to serve as a resource regarding the reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly we may use reasonable discretion in interpreting and applying this policy to services being delivered in a particular case. Further, the policy does not cover all issues related to reimbursement for services rendered to enrollees as legislative mandates, the provider contract documents, and the enrollee's benefit coverage documents, may supplement or in some cases supersede this policy. Finally, systems logic or set up may prevent the loading of this policy onto different claims platforms in exactly the same way; however, we strive to minimize these variations.

ACN Group Inc. (OptumHealth Physical Health, may modify this policy from time to time by publishing a new version of the policy on its Website; however, the information presented in this policy is believed to be accurate and current as of the date of publication.

Spinal Manipulation Under Anesthesia	
Type	Reimbursement
Number	0054
Approved by	
Reimbursement and Technology Committee Quality Improvement Committee	
Approval Date	
August 9, 2007 October 11, 2007	
Description	
This policy describes OptumHealth Physical Health position concerning the reimbursement of services described as manipulation of spine under Anesthesia (MUA) and services described as manipulation under joint anesthesia (MUJA).	
Audience	
Targeted Population	This policy applies to all products, all network and non-network health care providers. This includes non-network authorized, percent of charge contract, and flat rate/per diem contract providers.* <i>*Fee schedule/provider contract/client contract may supersede</i>

Policy Statement

OptumHealth Physical Health considers spinal manipulation under anesthesia (MUA), CPT code 22505, to be *unproven* and not reimbursable due to insufficient scientific evidence of efficacy in the treatment of neck, low back and related disorders.

Overview

Description:

Spinal manipulation under anesthesia (MUA) refers to manipulation of the spine while the patient is under general anesthesia or conscious sedation.

Spinal manipulation under joint anesthesia (MUJA) refers to conventional (fully conscious) manipulation following an anesthetic procedure directed at a specific articulation or articulations.

Summary of Literature Review:

Spinal MUA is viewed as *unproven*. The research evidence concerning spinal MUA is sparse and of very low quality. Any estimate of treatment effect is uncertain. The trade-offs between benefits, and risks and burdens are unclear.

Similar conclusions have been reached by many other health care organizations. None of the recently published evidence-based guidelines, which were reviewed, recommended MUA as a valid therapeutic option for common spinal conditions. Professional groups, who are proponents of spinal MUA, should pursue further investigation using experimental study designs and rigorous methodologies.

Clinical Policy/Position:

OptumHealth Care Solutions considers CPT code 22505, Spinal Manipulation Under Anesthesia, to be unproven and investigational or experimental due to insufficient research evidence of safety and/or efficacy in the clinical setting, when performed for conditions other than vertebral fracture or complete dislocation.

CPT codes for chiropractic manipulative treatment (98940 – 98942) should be used when conventional spinal manipulation is performed following the administration of a regional anesthetic/analgesic/steroid/proliferant injection (MUJA).

Edit Sources

OptumHealth Physical Health sources its Physical Medicine and Rehabilitation and Chiropractic CPT code payment policy methodology to methodologies used and recognized by third party authorities. The sources used to determine if a CPT code is reimbursable are:

American Medical Association. *Current Procedural Terminology (CPT) Professional Edition*, 2010

American Medical Association. *CPT Assistant* 1999; 9(1): January

Haldeman S, Kohlbeck FJ. *Principles and Practice of Chiropractic* 2005, 3rd edition; Chapter 43:841-860

Background Summary

Spinal manipulation performed while a patient is under general anesthesia or conscious sedation (MUA) differs from spinal manipulation performed under joint anesthesia (MUJA). The delivery and monitoring of the anesthesia takes place during the manipulative procedure with MUA. These services are typically provided in an out patient clinical or hospital setting. Manipulative procedures during MUA are usually modified from those performed under fully-conscious patient conditions.[1]

In contrast, the administration of anesthesia and manipulation are sequential with MUJA. Regional or joint injections typically precede manipulation and are independent of the subsequent manipulative procedure. Anesthesia and manipulation are distinct procedures that generally take place in separate locations. The manipulative procedure during MUJA usually mirrors conventional manipulation.[1]

The CPT code 22505 is described in the CPT Manual as “requiring anesthesia”. [2] According to the *CPT Assistant*, codes having the descriptor “requiring anesthesia” mean requiring general anesthesia. Therefore, use of the CPT code 22505 in conjunction with regional anesthetic/analgesic/steroid/proliferant injection is an inappropriate use of the code. In these instances CPT codes for chiropractic manipulative treatment (98940 – 98942) may be used.[3]

The correlating OptumHealth Physical Health Clinical Policy, 393 – Spinal Manipulation Under Anesthesia, may be referenced for complete literature review information:
<http://www.myoptumhealthphysicalhealth.com/ClinicalPoliciesByCat.asp>

Summary

The preponderance of sourced information and policies supports the position that spinal MUA (CPT code 22505) is considered unproven, investigational and experimental for conditions other than fracture or dislocation.

Coverage

CPT code 22505 (Manipulation of the spine requiring anesthesia, any region) is **not** a covered service.

Coding and Billing

<p>22505</p>	<p>Manipulation of the spine requiring anesthesia, any region; refers to manipulation of the spine while the patient is under general anesthesia or conscious sedation.</p>
<p>98940 98941 98942</p>	<p>Chiropractic manipulative treatment, spinal; these codes refer to conventional manipulation performed with or without a preceding regional injection (manipulation under joint anesthesia)</p>

References

1. Haldeman S, Kohlbeck FJ. *Principles and Practice of Chiropractic* 2005, 3rd edition; Chapter 43:841-860
2. American Medical Association. *Current Procedural Terminology (CPT) Professional Edition*, 2010
3. American Medical Association. *CPT Assistant* 1999; 9(1): January

History/Updates

Approval date: 10/11/07

Revision History: 10/9/08, 2/26/09, 4/8/10

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