Harvard Pilgrim Health Care | TUFTS Health Plan

Point32Health companies

Payment Policy:
Acupuncture

Applies to:

Commercial Products

☒ Harvard Pilgrim Health Care Commercial products
☒ Tufts Health Plan Commercial products

Public Plans Products

☐ Tufts Health Direct – A Massachusetts Qualified Health Plan (QHP) (a commercial product)
☒ Tufts Health Together – MassHealth MCO Plan and Accountable Care Partnership Plans
☒ Tufts Health RITogether – A Rhode Island Medicaid Plan
☒ Tufts Health One Care – A dual-eligible product

Senior Products

☒ Tufts Health Plan Senior Care Options (SCO) (a dual-eligible product)
☒ Tufts Medicare Preferred HMO/PPO (Medicare Advantage products)

Policy

Point32Health reimburses medically necessary acupuncture services to contracted/licensed providers with a specialty or subspecialty of acupuncture when the service is a covered benefit. Acupuncture benefits may vary greatly by products and employer groups.

Prerequisites

Applicable Point32Health referral, notification and authorization policies and procedures apply. Refer to the appropriate sections within the Provider Manuals for more information.

General Benefit Information

Services are pursuant to the member's benefit plan documents and are subject to applicable member out-of-pocket cost (e.g., copayment, coinsurance, deductible). Certain plans may have a "wellness allowance" that allows the member to be reimbursed for services not included in this policy. Member eligibility and benefit specifics should be verified prior to initiating services.

Use of non-contracted labs may have the unintended consequence of subjecting the member to unnecessary services not ordered by the treating provider or other unreasonable financial exposure. In such circumstances, Point32Health may hold the ordering provider accountable for any inappropriate behavior on the part of the nonparticipating lab that has been selected.

Note: Acupuncture is no longer a covered benefit for Tufts Health Direct members, effective for dates of service (DOS) beginning Jan. 1, 2026.

Point32Health Reimburses

- A maximum of three acupuncture services codes or a total of three units in any combination per visit

Point32Health Does *Not* Reimburse

- Needles are inherent to the acupuncture service and are not reimbursed separately

Provider Billing Guidelines and Documentation

Providers are reimbursed according to the applicable contracted rates and fee schedules.

Coding
These code tables may not be all-inclusive.

Code	Description
97810	Acupuncture, 1 or more needles; without electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient
97811	Acupuncture, 1 or more needles; without electrical stimulation, each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of needle(s) (List separately in addition to code for primary procedure)
97813	Acupuncture, 1 or more needles; with electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient
97814	Acupuncture, 1 or more needles; with electrical stimulation, each additional 15 minutes of personal one- on-one contact with the patient, with re-insertion of needle(s) (List separately in addition to code for primary procedure)

Senior Products

- Point32Health may cover acupuncture including dry needling for the treatment of chronic low back pain in accordance with Medicare NCD 30.3.3- Acupuncture for Chronic Low Back Pain
- Point32Health limits any combination of 20560-20561 (Needle insertion) or 97810-97814 (Acupuncture) when billed more than 20 times within a calendar year by any provider
- Submit modifier KX to indicate medical necessity for all visits beyond the initial 12 visits within 90 days

Related Policies and Resources

Payment Policies

- Modifiers
- Evaluation and Management
- Maximum Units

Clinical Policies

- Behavioral Health – Acupuncture Detoxification Level of Care Medical Necessity Guidelines (Public Plans)

Publication History

05/01/2026: Annual policy review; updated related policies
11/01/2025: Clarified Tufts Health Direct will not have coverage for acupuncture services, effective for DOS beginning Jan. 1, 2026
02/28/2025: Annual policy review; administrative edit
11/01/2024: Corrected language for visit limitation of Senior Products from 12 month period to calendar year to align with benefit document
04/01/2024: Policy moved to new template; includes all lines of business

Background and Disclaimer Information

This policy applies to the products of Harvard Pilgrim Health Care and Tufts Health Plan and their affiliates, as identified in the check boxes on the first page for services performed by contracted providers.

Payment is based on member benefits and eligibility on the date of service, medical necessity review, where applicable, and the provider's network participation agreement with the Plan. As every claim is unique, this policy is neither a guarantee of payment, nor a final indication of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization and utilization management requirements (when applicable), adherence to Plan policies and procedures, and claims editing logic. An authorization is not a guarantee of payment.

Point32Health reserves the right to amend a payment policy at its discretion. CPT and HCPCS codes are updated as applicable; please adhere to the most recent CPT and HCPCS coding guidelines.

We reserve the right to conduct audits on any provider and/or facility to ensure accuracy and compliance with the guidelines stated in this payment policy. If such an audit determines that a provider/facility did not comply with this payment policy, Harvard Pilgrim Health Care and Tufts Health Plan will expect the provider/facility to refund all payments related to noncompliance.