

BILLING / FEES / INSURANCE

Insurance Billing Codes: Which Should I Use for Acupuncture?

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The place to find insurance billing codes is in the Current Procedural Terminology (CPT) codebook published by the American Medical Association. That's right: every copy of this book purchased by you and me benefits the AMA. They have created and have the copyright on these codes. This book is a listing of descriptive terms and identifying codes for reporting medical services and procedures performed by doctors. The purpose of the terminology is to provide a uniform language that will accurately describe treatment and diagnostic services, thus providing a uniform method of communicating between doctors, insurance companies and patients.

The codes go through revisions and changes through the CPT editorial panel, with the assistance of physicians representing all specialties of health care. Many third-party payers and government agencies also contribute. In my experience, your office copy of the CPT codes will need to be updated every three to five years.

The CPT Codebook does include two codes used for acupuncture and electroacupuncture. They are:

97780 - Acupuncture, one or more needles; without electrical stimulation;

97781 - Acupuncture, one or more needles, with electrical stimulation.

If you are in California and are treating an injured worker in the workers' compensation jurisdiction, there are other codes to be used. They are:

97800 -- Acupuncture, one or more needles; without electrical stimulation;

97801 -- Acupuncture, one or more needles, with electrical stimulation;

97802 - Cupping;

97803 - Moxa.

Note: If you are doing acupuncture/electroacupuncture with moxa and/or cupping, you will only be paid for the acupuncture or elextroacupuncture, whereas if you did only the moxa or cupping, you would be paid for those procedures. This was a cost-containment effort from when the codes were designed for the California workers' compensation official medical fee schedule.

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