MANIPULATION UNDER ANESTHESIA

Non-Discrimination Statement and Multi-Language Interpreter Services information are located at the end of this document.

Coverage for services, procedures, medical devices and drugs are dependent upon benefit eligibility as outlined in the member's specific benefit plan. This Medical Coverage Guideline must be read in its entirety to determine coverage eligibility, if any.

This Medical Coverage Guideline provides information related to coverage determinations only and does not imply that a service or treatment is clinically appropriate or inappropriate. The provider and the member are responsible for all decisions regarding the appropriateness of care. Providers should provide BCBSAZ complete medical rationale when requesting any exceptions to these guidelines.

The section identified as “Description” defines or describes a service, procedure, medical device or drug and is in no way intended as a statement of medical necessity and/or coverage.

The section identified as “Criteria” defines criteria to determine whether a service, procedure, medical device or drug is considered medically necessary or experimental or investigational.

State or federal mandates, e.g., FEP program, may dictate that any drug, device or biological product approved by the U.S. Food and Drug Administration (FDA) may not be considered experimental or investigational and thus the drug, device or biological product may be assessed only on the basis of medical necessity.

Medical Coverage Guidelines are subject to change as new information becomes available.

For purposes of this Medical Coverage Guideline, the terms "experimental" and "investigational" are considered to be interchangeable.

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MANIPULATION UNDER ANESTHESIA (cont.)

Description:

Manipulation under Anesthesia (MUA):
MUA consists of a series of mobilization, stretching, and traction procedures to the spine and lower extremities performed while the individual receives anesthesia (usually general anesthesia or moderate sedation). Anesthesia or sedation is used to reduce pain, spasm, and reflex muscle guarding that may interfere with the delivery of therapy and to allow the therapist to break up joint and soft-tissue adhesions with less force than would be required to overcome individual resistance or apprehension. Manipulation is intended to break up fibrous and scar tissue to relieve pain and improve range of motion. Manipulation is also performed after injection of local anesthetic into lumbar zygapophyseal and/or sacroiliac joints under fluoroscopic guidance (MUJA) and after epidural injection of corticosteroid and local anesthetic (MUESI). Spinal manipulation under anesthesia has also been combined with other joint manipulation during multiple sessions. Together, these may be referred to as medicine-assisted manipulation (MAM).

Serial MUA:
MUA performed on consecutive days.
MANIPULATION UNDER ANESTHESIA (cont.)

Criteria:

COVERAGE FOR MANIPULATION UNDER ANESTHESIA IS DEPENDENT UPON BENEFIT PLAN LANGUAGE. REFER TO MEMBER’S SPECIFIC BENEFIT PLAN BOOKLET TO VERIFY BENEFITS.

➢ Single or serial manipulation under anesthesia is considered **medically necessary** with documentation of **ALL** of the following:

1. **ONE** of the following:
   - Post-surgical arthrofibrosis of shoulder or adhesive capsulitis (i.e., frozen shoulder)
   - Arthrofibrosis of the knee following trauma or knee surgery
   - Chronic contracture of upper or lower extremity joint (e.g., fixed contracture caused by neuromuscular conditions, trauma, surgery or burns) after failure of conservative treatment (e.g., physical therapy)

2. **ALL** of the following:
   - Pain with movement
   - Limited range of motion
   - No or mild osteoarthritis by imaging
   - Failure of conservative therapy as documented by **ALL** of the following:
     a. NSAIDs or acetaminophen ≥ 3 weeks or other medications (including scheduled drugs)
     b. Physical or occupational therapy or home exercise ≥ 6 weeks
     c. Intra-articular corticosteroid injection or contraindicated or refused
   - Continued symptoms for findings after treatment

➢ Single or serial manipulation under anesthesia is considered **medically necessary** for **ANY** of the following indications:

1. Reduction of a displaced fracture (e.g., long bones)
2. Reduction of acute/traumatic dislocation (e.g., shoulder)
MANIPULATION UNDER ANESTHESIA (cont.)

Criteria: (cont.)

- Single or serial manipulation under anesthesia for all other indications not previously listed or if above criteria not met is considered experimental or investigational based upon:
  
  1. Insufficient scientific evidence to permit conclusions concerning the effect on health outcomes,
  2. Insufficient evidence to support improvement of the net health outcome, and
  3. Insufficient evidence to support improvement of the net health outcome as much as, or more than, established alternatives.

- If benefit coverage for manipulation of the spine under anesthesia is not available, manipulation of the spine under anesthesia is considered a benefit plan exclusion and not eligible for coverage.

- Spinal manipulation and manipulation of other joints performed during the procedure (e.g., hip joint) with the individual under anesthesia, spinal manipulation under joint anesthesia, and spinal manipulation after epidural anesthesia and corticosteroid injection are considered experimental or investigational based upon:
  
  1. Insufficient scientific evidence to permit conclusions concerning the effect on health outcomes, and
  2. Insufficient evidence to support improvement of the net health outcome, and
  3. Insufficient evidence to support improvement of the net health outcome as much as, or more than, established alternatives.

These indications include, but are not limited to:

- Chronic spinal pain (i.e., cranial, cervical, thoracic and lumbar)
- Chronic sacroiliac pain
- Pelvic pain
MANIPULATION UNDER ANESTHESIA (cont.)

Resources:

Literature reviewed 10/30/18. We do not include marketing materials, poster boards and non-published literature in our review.

The BCBS Association Medical Policy Reference Manual (MPRM) policy is included in our guideline review. References cited in the MPRM policy are not duplicated on this guideline.


MANIPULATION UNDER ANESTHESIA (cont.)

Resources: (cont.)


MANIPULATION UNDER ANESTHESIA (cont.)

Non-Discrimination Statement:

Blue Cross Blue Shield of Arizona (BCBSAZ) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BCBSAZ provides appropriate free aids and services, such as qualified interpreters and written information in other formats, to people with disabilities to communicate effectively with us. BCBSAZ also provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, call (602) 864-4884 for Spanish and (877) 475-4799 for all other languages and other aids and services.

If you believe that BCBSAZ has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with: BCBSAZ’s Civil Rights Coordinator, Attn: Civil Rights Coordinator, Blue Cross Blue Shield of Arizona, P.O. Box 13466, Phoenix, AZ 85002-3466, (602) 864-2288, TTY/TDD (602) 864-4823, crc@azblue.com. You can file a grievance in person or by mail or email. If you need help filing a grievance BCBSAZ’s Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1–800–368–1019, 800–537–7697 (TDD). Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html

Multi-Language Interpreter Services:

Spanish: Si usted, o alguien a quien usted está ayudando, tiene preguntas acerca de Blue Cross Blue Shield of Arizona, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 602-864-4884.

Navajo: Díí kwe’ é atah níilígíí Blue Cross Blue Shield of Arizona haadá yit’éego bina’idilkidgo éi doodago Háida bíí anílyeedígíí t’áadoo le’e yína’idilkidgo beehaz’áanii hóóp díí t’áá hazaadk’eñíí háká a’doowolgo bee haz’a doo báq áñilígíí. Ata’ halne’ígíí kojí bichí’í hodíilínih 877-475-4799.

Chinese: 如果您，或是您正在協助的對象，有關於插入項目的名稱 Blue Cross Blue Shield of Arizona 方面的問題，您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯員，撥打電話 在此插入數字 877-475-4799。

Vietnamese: Nếu quý vị, hay người mà quý vị đang giúp đỡ, có câu hỏi về Blue Cross Blue Shield of Arizona quý vị sẽ có quyền được giúp và có thể thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thợ dịch viên, xin gọi 877-475-4799.

Arabic: إن كانت لديك أو لدى شخص تساعدك أسئلة بخصوص Blue Cross Blue Shield of Arizona المتوفرة، فلكلمة من دون أي تكلفة. للتحدث مع مترجم البديل 877-475-4799.
MANIPULATION UNDER ANESTHESIA (cont.)

Multi-Language Interpreter Services: (cont.)

Tagalog: Kung ikaw, o ang iyong tituluan, ay maay nagaranunan tungkol sa Blue Cross Blue Shield of Arizona, may karapatan ka na makakuha ng tulong at impormasyon sa iyong wika ng walang gastos. Upang makausap ang isang tgasal, tumawag sa 877-475-4799.

Korean: 만약 귀하 또는 귀하가 돕고 있는 어떤 사람이 Blue Cross Blue Shield of Arizona에 관해서 질문이 있다면 귀하는 그러한 도움과 정보를 귀하의 언어로 비용 부담없이 얻을 수 있는 권리가 있습니다. 그렇게 통역사와 얘기하기 위해서는 877-475-4799 로 전화하십시오.

French: Si vous, ou quelqu'un que vous êtes en train d'aider, a des questions à propos de Blue Cross Blue Shield of Arizona, vous avez le droit d'obtenir de l'aide et l'information dans votre langue à aucun coût. Pour parler à un interprète, appelez 877-475-4799.

German: Falls Sie oder jemand, dem Sie helfen, Fragen zum Blue Cross Blue Shield of Arizona haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 877-475-4799 an.

Russian: Если у вас или лица, которому вы помогаете, имеются вопросы по поводу Blue Cross Blue Shield of Arizona, то вы имеете право на бесплатное получение помощи и информации на вашем языке. Для разговора с переводчиком позвоните по телефону 877-475-4799.

Japanese: ご本人様、またはお客様の身の回りの方でも、Blue Cross Blue Shield of Arizona についてご質問がございましたら、ご希望の言語でサポートを受けたり、情報を入手したりすることができます。料金はかかかりません。通訳とお話される場合、877-475-4799 までお電話ください。

Farsi:

آگر شما یا کسی که شما به او کمک می‌کنید، سوال نمودید و اطلاعات به زبان خود را به طور رایگان دریافت نمایید 877-475-4799.

Assyrian:

کورس و قاموس، معنی و متن، پاسخگویی به سوالات شما، Blue Cross Blue Shield of Arizona در خصوص سوالات شما، پاسخگویی به سوالات شما، پاسخگویی به سوالات شما، پاسخگویی به سوالات شما 877-475-4799.

Serbo-Croatian: Ukoliko Vi ili neko kom Vi pomažete ima pitanje o Blue Cross Blue Shield of Arizona, imate pravo da besplatno dobijate pomoć i informacije na Vašem jeziku. Da biste razgovarali sa prevodiocem, nazovite 877-475-4799.

Thai: หากคุณ หรือคนที่คุณช่วยเหลือถามคำถามเกี่ยวกับ Blue Cross Blue Shield of Arizonaคุณมีสิทธิ์ได้รับความช่วยเหลือและข้อมูลภาษาของคุณได้โดยไม่เสียเงิน ติดต่อเราที่ 877-475-4799.