



An Independent Licensee of the Blue Cross Blue Shield Association

EVIDENCE-BASED CRITERIA
SECTION: SURGERY

ORIGINAL EFFECTIVE DATE: 12/06/22
LAST REVIEW DATE: 12/06/22
CURRENT EFFECTIVE DATE: 12/06/22
LAST CRITERIA REVISION DATE: 12/06/22
ARCHIVE DATE:

NEXT ANNUAL REVIEW DATE: 4TH QTR 2023

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 Evidence-Based Criteria must be read in its entirety to determine coverage eligibility, if any.

This Evidence-Based Criteria 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.

Evidence-Based Criteria are subject to change as new information becomes available.

For purposes of this Evidence-Based Criteria, 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.

Criteria:

- 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 \geq 3 weeks or other medications (including scheduled drugs)
 - b. Physical or occupational therapy or home exercise \geq 6 weeks
 - c. Intra-articular corticosteroid injection or contraindicated or refused
 - Continued symptoms for findings after treatment



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MANIPULATION UNDER ANESTHESIA (cont.)

Criteria: (cont.)

- 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)
- Single or serial manipulation under anesthesia for all other indications not previously listed or if above criteria not met is considered **experimental or investigational** when any **ONE** or more of the following criteria are met:
 1. Lack of final approval from the appropriate governmental regulatory bodies (e.g., Food and Drug Administration); or
 2. Insufficient scientific evidence to permit conclusions concerning the effect on health outcomes; or
 3. Insufficient evidence to support improvement of the net health outcome; or
 4. Insufficient evidence to support improvement of the net health outcome as much as, or more than, established alternatives; or
 5. Insufficient evidence to support improvement outside the investigational setting.
- 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** when any **ONE** or more of the following criteria are met:
 1. Lack of final approval from the appropriate governmental regulatory bodies (e.g., Food and Drug Administration); or
 2. Insufficient scientific evidence to permit conclusions concerning the effect on health outcomes; or
 3. Insufficient evidence to support improvement of the net health outcome; or
 4. Insufficient evidence to support improvement of the net health outcome as much as, or more than, established alternatives; or
 5. Insufficient evidence to support improvement outside the investigational setting.

These indications include, *but are not limited to:*

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

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MANIPULATION UNDER ANESTHESIA (cont.)

Resources:

Literature reviewed 12/06/22. We do not include marketing materials, poster boards and non-published literature in our review.

Resources prior to 12/06/22 may be requested from the BCBSAZ Medical Policy and Technology Research Department.

1. Dagenais S, Mayer J, Wooley JR, Haldeman S. Evidence-informed management of chronic low back pain with medicine-assisted manipulation. *Spine J.* Jan-Feb 2008;8(1):142-9. doi:10.1016/j.spinee.2007.09.010
2. Digiori D. Spinal manipulation under anesthesia: a narrative review of the literature and commentary. *Chiropr Man Therap.* May 14 2013;21(1):14. doi:10.1186/2045-709X-21-14
3. Dougherty P, Bajwa S, Burke J, Dishman JD. Spinal manipulation postepidural injection for lumbar and cervical radiculopathy: a retrospective case series. *J Manipulative Physiol Ther.* Sep 2004;27(7):449-56. doi:10.1016/j.jmpt.2004.06.003
4. Dreyfuss P, Michaelsen M, Horne M. MUJA: manipulation under joint anesthesia/analgesia: a treatment approach for recalcitrant low back pain of synovial joint origin. *J Manipulative Physiol Ther.* Oct 1995;18(8):537-46.
5. Farrar JT, Young JP, Jr., LaMoreaux L, Werth JL, Poole MR. Clinical importance of changes in chronic pain intensity measured on an 11-point numerical pain rating scale. *Pain.* Nov 2001;94(2):149-158. doi:10.1016/S0304-3959(01)00349-9
6. Gordon R, Cremata E, Hawk C. Guidelines for the practice and performance of manipulation under anesthesia. *Chiropr Man Therap.* Feb 3 2014;22(1):7. doi:10.1186/2045-709X-22-7
7. Hurst H, Bolton J. Assessing the clinical significance of change scores recorded on subjective outcome measures. *J Manipulative Physiol Ther.* Jan 2004;27(1):26-35. doi:10.1016/j.jmpt.2003.11.003
8. Kohlbeck FJ, Haldeman S, Hurwitz EL, Dagenais S. Supplemental care with medication-assisted manipulation versus spinal manipulation therapy alone for patients with chronic low back pain. *J Manipulative Physiol Ther.* May 2005;28(4):245-52. doi:10.1016/j.jmpt.2005.03.003
9. Michaelsen MR. Manipulation under joint anesthesia/analgesia: a proposed interdisciplinary treatment approach for recalcitrant spinal axis pain of synovial joint origin. *J Manipulative Physiol Ther.* Feb 2000;23(2):127-9. doi:10.1016/s0161-4754(00)90082-4
10. Palmieri NF, Smoyak S. Chronic low back pain: a study of the effects of manipulation under anesthesia. *J Manipulative Physiol Ther.* Oct 2002;25(8):E8-E17. doi:10.1067/mmt.2002.127072



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Resources: (cont.)

11. Peterson CK, Humphreys BK, Vollenweider R, Kressig M, Nussbaumer R. Outcomes for chronic neck and low back pain patients after manipulation under anesthesia: a prospective cohort study. *J Manipulative Physiol Ther.* Jul-Aug 2014;37(6):377-82. doi:10.1016/j.jmpt.2014.05.002
12. West DT, Mathews RS, Miller MR, Kent GM. Effective management of spinal pain in one hundred seventy-seven patients evaluated for manipulation under anesthesia. *J Manipulative Physiol Ther.* Jun 1999;22(5):299-308. doi:10.1016/s0161-4754(99)70062-x

Coding:

CPT: 00640, 01160, 01999, 21073, 22505, 23655, 23700, 24300, 25259, 26340, 26675, 26705, 26775, 27198, 27275, 27570, 27860

History:

Date:

Activity:

Medical Policy Panel	12/06/22	Approved guideline
Pediatric Advisory Subcommittee	08/18/22	Review with no revisions

Policy Revisions:



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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 nílínígíí Blue Cross Blue Shield of Arizona haada yit'éego bína'idíílkidgo éí doodago Háida bíjá anilyeedígíí t'áadoo le'é yína'idíílkidgo beehaz'áanii hółq díí t'áa hazaadk'ehjí háká a'doowołgo bee haz'ą doo baqah ilínígóó. Ata' halne'ígíí kojí' bich'í' hodíilnih 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，請撥電話 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 thêm thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, xin gọi 877-475-4799.

Arabic:

إن كان لديك أو لدى شخص تساعد أسئلة بخصوص Blue Cross Blue Shield of Arizona، فلديك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك من دون أية تكلفة. للتحدث مع مترجم اتصل بـ 877-475-4799.



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Multi-Language Interpreter Services: (cont.)

Tagalog: Kung ikaw, o ang iyong tinutulangan, ay may mga katanungan 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 tagasalin, tumawag sa 877-475-4799.

Korean: 만약 귀하 또는 귀하가 돕고 있는 어떤 사람이 Blue Cross Blue Shield of Arizona 에 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: اگر شما، یا کسی که شما به او کمک میکنید، سوال در مورد Blue Cross Blue Shield of Arizona، داشته باشید حق این را دارید که کمک و اطلاعات به زبان خود را به طور رایگان دریافت نمایید 877-475-4799 [تماس حاصل نمایید].

Assyrian: Blue Cross Blue Shield of Arizona... 877-475-4799

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

Thai: หากคุณ หรือคนที่คุณกำลังช่วยเหลือถามเกี่ยวกับ Blue Cross Blue Shield of Arizona คุณสมสิทธิ์ที่จะได้รับความช่วยเหลือและขอมูลในภาษา ของคุณได้โดยไม่มีค่าใช้จ่าย โปรดขอมูล โทร 877-475-4799