

Manipulation under Anesthesia for Chronic Pain

Policy Number: **M111121171**
Effective Date: **2/1/2012**
Sponsoring Department: **Health Care Services**
Impacted Department(s): **Health Care Services**

Type of Policy: Internal External

Data Classification: Confidential Restricted Public

Applies to (Line of Business):

- Corporate (All)
- State Products, if yes which plan(s): MediSource; MediSource Connect; Child Health Plus Essential Plan
- Medicare, if yes, which plan(s): MAPD; PDP; ISNP; CSNP
- Commercial, if yes, which type: Large Group; Small Group; Individual
- Self-Funded Services *(Refer to specific Summary Plan Descriptions (SPDs) to determine any pre-authorization or pre-certification requirements and coverage limitations. In the event of any conflict between this policy and the SPD of a Self-Funded Plan, the SPD shall supersede the policy.)*

Excluded Products within the Selected Lines of Business (LOB)

N/A

Applicable to Vendors? Yes No

Purpose and Applicability:

To set forth the coverage policy for manipulation under anesthesia for chronic pain.

Policy:

Commercial, Self-Funded and Medicare Advantage:

Based upon the lack of peer-reviewed literature, manipulation under anesthesia for the treatment of chronic pain, in absence of a vertebral fracture or dislocation, has not been proven to be medically effective and is considered experimental.

This policy does not address manipulation under anesthesia for fractures, adhesive capsulitis, completely dislocated joints or fibrosis of a joint that may occur following total joint replacements.

MediSource, MediSource Connect, Child Health Plus and Essential Plan:

MediSource, MediSource Connect, Child Health Plus and Essential Plan cover manipulation of spine requiring anesthesia based on medical necessity review by the Medical Director.

Background:

Manipulation under anesthesia (MUA) is aimed at reducing pain and improving range of motion and is a treatment modality that consists of manipulation and stretching procedures performed while an individual receives anesthesia (e.g., conscious sedation, general anesthesia). A chiropractor, osteopathic physician or medical physician may perform this type of manipulation with an anesthesiologist in attendance.

This procedure has not been established as either safe or effective for the treatment of musculoskeletal disorders such as neck and back problems. Critical issues such as selection criteria, outcome assessments, and long-term benefits need to be addressed by well-designed studies before this procedure can be considered as an essential part of conservative therapy. There are currently no widely accepted guidelines on standards for chiropractic MUA. The 1993 Guidelines for Chiropractic Quality Assurance and Practice Parameters considered MUA “equivocal”, and these guidelines have not been updated since 1993. Evidence for the effectiveness of these protocols remains largely anecdotal, based on case series mimicking many other surgical and conservative approaches for the treatment of chronic pain syndromes of musculoskeletal origin.

An evaluation of the peer-reviewed scientific literature, including but not limited to subscription materials, has provided Independent Health the basis for its medical necessity coverage outlined above.

Pre-Authorization Required? Yes No

Pre-authorization is required for this service.

Definitions

Manipulation under anesthesia (MUA) consists of a series of stretching, mobilization and traction procedures performed under anesthesia. MUA is performed by chiropractors, physical therapists, physicians or other health care providers who are licensed to perform the service. MUA is generally performed with an anesthesiologist in attendance.

References

Related Policies, Processes and Other Documents

N/A

Non-Regulatory references

Digiorgi D. Spinal manipulation under anesthesia: a narrative review of the literature and commentary. Chiropr Man Therap. 2013 May 14;21(1):14. Available at:

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3691523/pdf/2045-709X-21-14.pdf>

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Gordon R, Cremata E, Hawk C. Guidelines for the practice and performance of manipulation under anesthesia. Chiropr Man Therap. 2014 Feb 3;22(1):7.

Kohlbeck FJ, Haldeman S, Hurwitz EL, et al. Supplemental care with medication-assisted manipulation versus spinal manipulation therapy alone for patients with chronic low back pain. J Manipulative Physiol Ther. 2005 May;28(4):245-52.

Palmieri NF, Smoyak S. Chronic low back pain; a study of the effects of manipulation under anesthesia. J Manipulative Physiol, Ther 2002; 25 (8): E8 – E17.

Regulatory References

New York State Department of Health [web site]. New York State Medicaid Program Physician Procedure Codes. Section 6 – Anesthesia. April 2023. . Available at:

https://www.emedny.org/ProviderManuals/Physician/PDFS/Physician_Procedure_Codes_Sect6.pdf

Accessed October 13, 2023.

New York State Department of Health [web site]. Physician - Procedure Codes, Section 5 – Surgery. April 2023. Available at:

<https://www.emedny.org/ProviderManuals/Physician/PDFS/Physician%20Procedure%20Codes%20Sect5.pdf> Accessed October 13, 2023.

This policy contains medical necessity criteria that apply for this service. Please note that payment for covered services is subject to eligibility criteria, contract exclusions and the limitations noted in the member’s contract at the time the services are rendered.

Version Control

Signature / Approval on File? Yes No

Revision Date	Owner	Notes
12/1/2023	Health Care Services	Revised

12/1/2022	Health Care Services	Revised
1/1/2022	Health Care Services	Reviewed
1/1/2021	Health Care Services	Reviewed
2/1/2020	Medical Management	Revised
3/1/2019	Medical Management	Revised
3/1/2018	Medical Management	Revised
4/1/2017	Medical Management	Revised
5/1/2016	Medical Management	Revised
4/1/2015	Medical Management	Revised
3/1/2014	Medical Management	Revised