Medica Coverage Policy

Policy Name:	**Craniosacral Therapy**
Effective Date:	**4/1/2024**

Important Information – Please Read Before Using This Policy

These services may or may not be covered by all Medica plans. Coverage is subject to requirements in applicable federal or state laws. Please refer to the member's plan document for other specific coverage information. If there is a difference between this general information and the member's plan document, the member's plan document will be used to determine coverage. With respect to Medicare, Medicaid, and other government programs, this policy will apply unless these programs require different coverage. Members may contact Medica Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions may call the Medica Provider Service Center toll-free at 1-800-458-5512.

Medica coverage policies are not medical advice. Members should consult with appropriate health care providers to obtain needed medical advice, care, and treatment.

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Note: This policy is no longer scheduled for routine review of the scientific literature.

Craniosacral therapy is investigative and unproven, and therefore **NOT COVERED**. There is insufficient reliable evidence in the form of high quality peer-reviewed medical literature to establish the efficacy or effects on health care outcomes.

Description

Craniosacral therapy, also known as cranial balancing, cranial osteopathy, and cranial sacral manipulation, is a noninvasive manipulative technique. Using subtle palpation of the cranium, spine, and sacrum, the therapist claims to be able to detect pulsations and rhythms of flow of the cerebrospinal fluid (CSF). The therapist then gently massages or manipulates the bones of the skull and spine working with the craniosacral rhythm. The goal of this therapy is to normalize, balance, and rid blockages in various systems throughout the body so the body can function in a healthy manner.

Supporters claim that craniosacral therapy is useful for a variety of musculoskeletal and general medical conditions, including but not limited to, headaches, neck and back pain, temporomandibular joint (TMJ) disease, chronic fatigue, poor coordination, depression, hyperactivity, attention deficit disorder, and problems with the central nervous system. Some practitioners also support its use with newborns claiming the birth process can cause problems with the cartilage and membranes surrounding the skull.

FDA Approval

Craniosacral therapy is a procedure and thus not regulated by the FDA.

Prior Authorization

Prior authorization is not applicable. Claims for this service are subject to retrospective review and denial of coverage, as investigative services are not eligible for reimbursement.

Coding Considerations

Use the current applicable CPT/HCPCS code(s). The following codes are included below for informational purposes only and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement.

CPT Codes:

- **97139** - Unlisted therapeutic procedure

Original Effective Date: 2/1/2012

Re-Review Date(s): 11/19/2014
2/21/2018
2/10/2020 – administrative update; format
1/20/2021 – Clinical Review Reserve
1/24/2024

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