## For more details, please see Protocols for different insurance companies. This Reference Guide is only to show billable codes as well as to mention hard rules. Office Visits; Up to 3 Insertions; Up to 2 Cuppings Dx (ICD-10) Codes: Any code except fertility Procedure Codes: (Can be billed every 6 visits, every ~25-30 days or new complaint, such as being sick or new pain) - Not covered Office Visits; Up to 2 Insertions; Up to 2 Cuppings Dx (ICD-10) Codes: Any relevant pain ICD code One diagnosis code only that matches referral Procedure Codes: (up to 3 total sets per DOS) Add modifier GP to the ALL below codes for Dx (ICD-10) Codes: Only specific pain ICD codes. Only bill one ICD code at a time. See allowed

can also be billed alone if the patient does not want acupuncture and just wants cupping or

code sheets in break room.

acupressure. Can use on infants/toddlers.

Procedure Codes:

**Billing Quick Reference Guide** 

