

# Routine Naturopathic Services

**Applies to:** Classic HMO, Total Health HMO

## Routine Naturopathic Services

Routine naturopathic services are a supplemental benefit offered on select Premera Blue Cross Medicare Advantage plans. Naturopaths can't be assigned as a primary care provider for members.

Naturopathic medicine combines modern and traditional methods. It is a distinct health care profession that emphasizes prevention, treatment, and optimal health focusing on the body's ability to heal itself. Naturopathy uses diet, exercise, lifestyle changes, and natural therapies to enhance the body's ability to ward off and combat disease. This benefit allows members to visit a Doctor of Naturopathy for medically related services.

This benefit also covers some routine naturopathic services provided via telehealth/telemedicine, which occurs when the naturopathic provider and the patient are not at the same site. Premera will consider for reimbursement the following telehealth services when they are rendered via audio and video and reported with place of service 02 (the location where health services and health related services are provided or received, through a telecommunication system): e-visits and virtual check-ins.

This benefit does not cover durable medical equipment, herbs, homeopathic remedies, medications, and nutritional supplements, vitamins, or vitamin injections.

## Original Medicare

Medicare doesn't cover routine naturopathic medicine services.

## Does the member require a referral to receive this service?

Referrals aren't required for routine naturopathic services.

## Member cost sharing

Routine naturopathy: See the copay listed in the [Evidence of Coverage](#) (EOC) for routine naturopathic services.

Plan	Classic HMO	Total Health HMO
Routine Naturopathic Services	6 visits \$30 copay	6 visits \$30 copay

Conditions for Payment	
Eligible provider	Naturopathic doctor (ND) does not have hospital privileges in WA state Naturopathic medical doctor (NMD)
Payable location	Home, office
Frequency	Please see the plan <a href="#">EOC</a> for allowable number of services.
Diagnosis restrictions	Restrictions apply
Age restrictions	No restrictions
CPT Codes	Naturopathic Services
99202	New patient office visit/examination; 15-29 minutes spent on the date of service
99203	New patient office visit/examination; 30-44 minutes spent on the date of service
99204	New patient office visit/examination; 45-59 minutes spent on the date of service
99211	Established patient office visit/examination; presenting problem is minimal
99212	Established patient office visit/examination; 10-19 minutes spent on the date of service
99213	Established patient office visit/examination; 20-29 minutes spent on the date of service
99214	Established patient office visit/examination; 30-39 minutes spent on the date of service
97026	Infrared modality; one or more areas
97140	Manual therapy; (e.g., mobilization/manipulation, manual lymphatic drainage, manual traction), one or more areas, each 15 minutes
81000	Urinalysis, routine, with microscopy
Telehealth	
The <b>distant site</b> is where the rendering provider is housed during a telehealth encounter and is reported on the claim with POS 02 in Box 24B on the 1500 claim form.	

**Billing Instructions for providers**

1. Bill services on the CMS-1450 (UB-04) claim form, or 837 equivalent claim form.
2. Use the Premera Blue Cross Medicare Advantage HMO unique billing requirements.
3. Report CPT/HCPCS codes and diagnosis codes to the highest level of specificity.
4. Report your National Provider Identifier number on all claims.
5. Use electronic billing.

## Notes

- Refer to your supplemental/routine fee schedule for covered naturopathic services.
- All codes are subject to change.
- Please follow original Medicare-covered indications and coding rules when billing Medicare-covered services and review codes at [cms.gov](https://www.cms.gov) before submitting claims.

## Revision History

Policy number: PMA-HMO 1007

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Effective: 01/01/2024