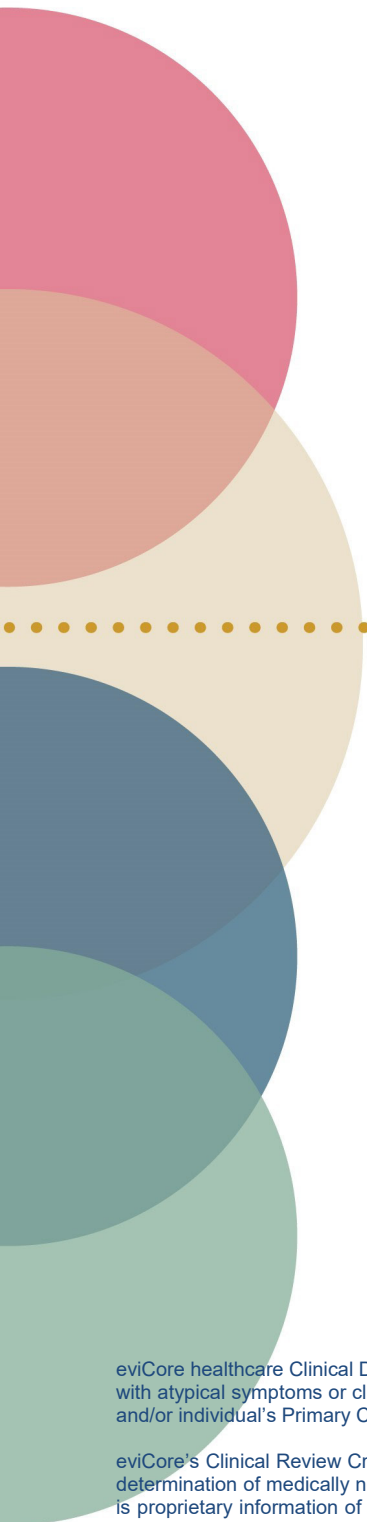




CLINICAL GUIDELINES

Massage Therapy

Version 1.0.2022
Effective May 2, 2022



eviCore healthcare Clinical Decision Support Tool Diagnostic Strategies: This tool addresses common symptoms and symptom complexes. Requests for individuals with atypical symptoms or clinical presentations that are not specifically addressed will require physician review. Consultation with the referring physician, specialist and/or individual's Primary Care Physician (PCP) may provide additional insight.

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Clinical guidelines for medical necessity review of Comprehensive Musculoskeletal Management Services.

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MT-1.0: Criteria for the Provision of Massage Therapy Services

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MT-1.1: Definitions

Activities of Daily Living

- Activities of Daily Living include Basic Activities of Daily Living and Instrumental Activities of Daily Living.
 - ◆ **Basic Activities of Daily Living** are oriented towards taking care of one's own physical needs. These activities include walking, changing positions, dressing, and personal hygiene.
 - ◆ **Instrumental Activities of Daily Living** are more complex and support independent living within the home and community. These activities may include driving, housecleaning, meal preparation, care for others, child rearing, and shopping.

Massage Therapy Services

- Massage Therapy Services are those within the scope of a licensed/certified provider in the applicable jurisdiction.

Exacerbation

- An Exacerbation occurs when previously improved functional deficits recur following a plateau in the ability to perform Activities of Daily Living. This results in a significant decline in the ability to perform Activities of Daily Living when compared to the pre-exacerbation levels of function. A significant decline must be quantified. This decline can be demonstrated by a worsening of equal or greater value than an established Minimally Clinical Important Difference (MCID) or Minimum Detectable Change (MDC) on a standardized assessment for the individual's condition.

Generally Accepted Standards of Practice

- Generally Accepted Standards of Practice are widely-accepted clinical concepts and practices based on high-quality scientific evidence published in the peer-reviewed literature and/or evidence-based guidelines.

Maintenance Massage Therapy Services

- Maintenance Massage Therapy Services are those that are performed to maintain the individual's current condition or to prevent or slow deterioration of the individual's condition. Maintenance Massage Therapy Services are not considered Medically Necessary.

Minimally Clinical Important Difference (MCID)

- Minimally Clinical Important Difference (MCID) is the smallest change in the score of a standardized assessment tool that is identified to be beneficial. The MCID is a statistical value established in published, peer-reviewed research.

Minimum Detectable Change (MDC)

- Minimum Detectable Change (MDC) is a change in the score of a standardized assessment tool that is greater than measurement error. The MDC is a statistical value established in published, peer-reviewed research.

Palliative Massage Therapy Services

- Palliative Massage Therapy Services are those performed to alleviate symptoms without providing corrective benefit to the condition. An individual receiving Palliative Massage Therapy Services, in most instances, demonstrates varying lapses between treatments. Palliative Massage Therapy Services are not considered Medically Necessary. Please review **MT-3.3 Condition Specific Considerations** for condition specific considerations of Massage Therapy Services for Cancer Pain.

Preventative Massage Therapy Services

- Preventative Massage Therapy Services are those performed in the management of the asymptomatic individual. Preventative Massage Therapy Services are not considered Medically Necessary.

MT-1.2: Indications for Treatment

Medically necessary Massage Therapy Services are those that are reasonable and necessary, based on Generally Accepted Standards of Practice, for the evaluation, diagnosis, and treatment of a condition to reduce pain or restore lost function resulting from an injury or illness that is musculoskeletal in origin or an included condition listed in **MT-3.1: Included Conditions**.

MT-1.3: Non-Indications

The following Massage Therapy Services are considered **not medically necessary**:

- Maintenance Massage Therapy Services, Preventative Massage Therapy Services, and Palliative Massage Therapy Services as defined in **MT-1.1 Definitions**.
- Massage Therapy Services for the treatment of disorders that are non-musculoskeletal in origin (e.g. systemic, visceral, central nervous system, or infectious conditions), other than those described in **MT-3.1 Included Conditions**.
- Treatment that does not have a direct therapeutic relationship to the region of complaint.
- Massage Therapy Services provided for individuals without quantified pain, quantified deficits in the ability to perform Activities of Daily Living, or a standardized assessment to necessitate care based on Generally Accepted Standards of Practice as defined in **MT-1.1: Definitions**. Recommended standardized assessments to quantify symptoms and track progress are listed in **MT-2.2: Recommended Standardized (Musculoskeletal)** and **MT-3.2: Recommended Standardized Assessments (Non-musculoskeletal)**.

- Massage Therapy Services that are not expected to result in significant, measurable, progressive improvement in quality of life or ability to perform Activities of Daily Living within a reasonable and generally predictable period of time based on Generally Accepted Standards of Practice as defined in **MT-1.1: Definitions**.
- Massage Therapy Services related to recreational activities or sport-specific performance in the absence of quantified deficits in the ability to perform Activities of Daily Living as described in **MT-1.2 Indications for Treatment**.
- Massage Therapy Services performed at a frequency, duration, or quantity that exceeds the amount of Medically Necessary Massage Therapy Services for the individual's condition based on:
 - ◆ The severity of the clinical findings
 - ◆ The presence or absence of complicating factors
 - ◆ The natural history of the condition, and
 - ◆ The expectation for progressive improvement in quality of life or the ability to perform Activities of Daily Living
 - ◆ Generally Accepted Standards of Practice as defined in **MT-1.1: Definitions**.
- Massage Therapy Services that are performed in the presence of signs and/or symptoms that suggest life or limb threatening conditions and require additional evaluation, immediate referral, or medical co-management prior to treatment based on Generally Accepted Standards of Practice as defined in **MT-1.1 Definitions**. These include findings that are likely to reflect a serious underlying condition such as:
 - ◆ Aneurysm or dissection
 - ◆ Cancer
 - ◆ Cauda equina syndrome
 - ◆ Fracture
 - ◆ Infection
 - ◆ Progressive neurologic conditions
 - ◆ Suicidal ideation (See **MT-2.3: Mental Health Considerations**)
- Massage Therapy Services that replace or delay other medically necessary care based on Generally Accepted Standards of Practice as defined in **MT-1.1 Definitions**.
- Requests for Continuation of Treatment (after the initial request) that do not include current information to demonstrate that **ANY** of the following criteria have been met:
 - ◆ An Exacerbation occurs as defined in **MT-1.1 Definitions**, and Massage Therapy Services are expected to result in a return to the pre-exacerbation quality of life or ability to perform Activities of Daily Living.
 - ◆ Quantified assessments indicate significant improvement in quality of life or ability to perform Activities of Daily Living attributable to recent Massage Therapy Services for the condition. A significant response may be demonstrated through **ANY** of the following:
 - An improvement of equal or greater value than an established MCID (as defined in **MT-1.1 Definitions**) on a standardized assessment for the individual's condition.

- An improvement of equal or greater value than an established MDC (as defined in **MT-1.1 Definitions**) on a standardized assessment for the individual's condition.
 - Significant and quantified improvement in quality of life or ability to perform Activities of Daily Living as defined in **MT-1.1 Definitions**.
- The submitted clinical information does not establish the individual's current condition and medical necessity for Massage Therapy Services based on Generally Accepted Standards of Practice as defined in **MT-1.1: Definitions**.
 - Massage Therapy Services rendered when the complexity of the individual's condition does not require the clinical judgment and knowledge of a qualified provider.
 - When post-service claim reviews are allowed and the submitted information to support that the requested Massage Therapy Services were performed.

MT-1.4: Benefits, Coverage Policies, and Eligibility

Benefits, coverage policies, and eligibility issues pertaining to each health plan and/or jurisdiction may take precedence over eviCore's medical necessity criteria. The final determination of reimbursement for Massage Therapy Services is the decision of the health plan and is based on the individual's policy or benefit entitlement structure as well as claims processing rules. Providers should reference health plan policies for covered and non-covered Massage Therapy Services.

MT-2.0: Clinical Considerations for Musculoskeletal Conditions

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MT-2.1: Etiology

Submitted information must show symptoms are caused by a condition that is musculoskeletal in origin (as opposed to symptoms originating from systemic, visceral, central nervous system or infectious conditions). For symptoms caused by non-musculoskeletal conditions, refer to **MT-3.0: Clinical Considerations for Non-Musculoskeletal Conditions**.

MT-2.2: Recommended Standardized Assessments

Standardized assessment tools are used to assess and track changes in pain levels or in restrictions of Activities of Daily Living. Recommended standardized assessment tools are listed below:

Measure of Function	Reference
Disabilities of Arm, Shoulder, Hand (DASH and QuickDASH)	Franchignoni 2014; Angst 2011; Rysstad 2020
Headache Disability Index (HDI)	Jacobson 1994; Jacobson 1995
Hip Disability and Osteoarthritis Outcome Score (HOOS)	Ornetti 2009
Knee Injury and Osteoarthritis Outcome Score (KOOS)	Roos 2003; Ornetti 2009
Lower Extremity Functional Scale (LEFS)	Binkley 1999; Williams 2012
Neck Disability Index (NDI)	Young 2019; MacDermid 2009
Oswestry Disability Index (ODI)	Davidson 2002; Maughan 2010; Clohesy 2018
Patient Specific Functional Scale (PSFS)	Horn 2012; Hefford 2012; Maughan 2010; Rysstad 2020
Roland-Morris Disability Questionnaire (RMDQ)	Stratford 1996; Ostelo 2004; Maughan 2010; Clohesy 2018
Shoulder Pain and Disability Index (SPADI)	Schmidt 2014; Angst 2011
Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC)	Williams 2012; Whitehouse 2003; Whitehouse 2008; Clement 2018
Visual Analog Scale, Numeric Rating Scale (VAS, NRS); Defense and Veterans Pain Rating Scale (DVPRS)	Thong 2018; Turner 2004; Young 2019; Maughan 2010; Farrar 2001; Polomano 2016; Nassif 2014

MT-2.3: Mental Health Considerations

Referral to a qualified mental health professional is required when there are signs of an unmanaged behavioral health disorder. Immediate referral to a counselor or helpline is required if there are **ANY** indications of thoughts or plans for self-harm. The National Suicide Prevention Lifeline is available 24 hours every day at 1-800-273-8255.

MT-3.0: Clinical Considerations for Non-Musculoskeletal Conditions

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MT-3.1: Included Conditions

- Submitted information must show that Massage Therapy Services are primarily and directly focused on care for one of the following non-musculoskeletal conditions:
 - ◆ Cancer Pain
 - ◆ Fibromyalgia

MT-3.2: Recommended Standardized Assessments

- Standardized assessment tools are used to assess and track changes in symptoms and/or condition status. Recommended standardized assessment tools are listed below:

Assessment	Reference
Quality Of Life Questionnaire Core 30 (QLQ-C30)	Aaronson 1993
Fibromyalgia Impact Questionnaire (FIQ)	Williams 2011; Bennett 2009
Patient Specific Functional Scale (PSFS)	Horn 2012; Hefford 2012; Maughan 2010; Rysstad 2020
Visual Analog Scale, Numeric Rating Scale (VAS, NRS); Defense and Veterans Pain Rating Scale (DVPRS)	Thong 2018; Turner 2004; Young 2019; Maughan 2010; Farrar 2001; Polomano 2016; Nassif 2014

MT-3.3: Condition Specific Considerations

Cancer Pain

- Massage Therapy Services for cancer pain must be an adjunct to a comprehensive treatment program as directed by the oncologist and cancer care team. Appropriate medical co-management should be in place. Dates of previous and upcoming surgery, chemotherapy, or radiation treatments are helpful additional information to report, since these affect expected results of care with Massage Therapy Services. While adjunctive Massage Therapy Services may ease symptoms during a cancer treatment program, it is not an equivalent or replacement for any aspect of the standard cancer treatment program. Please consult the health plan in cases of hospice care or inpatient services, as eviCore does not manage inpatient services.

Fibromyalgia

- Appropriate medical evaluation and diagnosis should be in place when treating fibromyalgia with Massage Therapy Services. Accurate diagnosis is important because fibromyalgia symptoms may occur in many other physical disorders which require diagnosis and care beyond massage therapy.

MT-3.4: Mental Health Considerations

Referral to a qualified mental health professional is required when there are signs of an unmanaged behavioral health disorder. Immediate referral to a counselor or helpline is required if there are **ANY** indications of thoughts or plans for self-harm. The National Suicide Prevention Lifeline is available 24 hours every day at 1-800-273-8255.

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