



Subject: Prolotherapy*

Effective Date: March 23, 2004

Department(s): Utilization Management

Policy: Prolotherapy (also known as regenerative injection therapy) for musculoskeletal disorders is not reimbursable under Plans administered by QualCare, Inc.

Objective: To assure proper and consistent reimbursement and to exclude coverage of an unproven procedure.

Procedure:

- Requests for prolotherapy, regenerative injection therapy, or musculoskeletal sclerotherapy (**HCPCS M0076**) will be denied as unproven and thus experimental/investigational, on the basis of lack of adequate objective proof of efficacy in refereed medical literature.
- Denial of prolotherapy, regenerative injection therapy, or musculoskeletal sclerotherapy will apply irrespective of the professional credentials of the provider.

References

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Drafted By/Date: B.Fisher MD/03/01/04

Approved By/Date: QM Committee 03/02/04

Reviewed w/o Revision By/Date: B.Fisher, MD 06/29/07

Approved By/Date: QM Committee 07/31/07

Revised By/Date: B.Fisher, MD 01/10/09

Approved By/Date: QM Committee 02/24/09

Revised By/Date: M.McNeil, MD 04/13/11

Approved By/Date: QM Committee, 05/10/11

Reviewed w/o Revision By/Date: M.McNeil, MD 04/26/13

Approved By/Date: QM Committee 5/14/13

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*Consistent with Summary Plan Description (SPD). When there is discordance between this policy and the SPD, the provisions of the SPD prevail.