

Subject: Chiropractic

Effective Date: 4/16 Revision Date: 10/22

DESCRIPTION

The OSU Health Plan limits coverage of chiropractic services to the treatment of the conditions and/or diagnoses listed in this policy, where the legally licensed chiropractor is practicing within the scope of his/her license. These diagnoses must include appropriate clinical information to support the medical necessity for such treatments.

POLICY

OSU Health Plan may request treatment plans and progress notes for medical review. We reserve the right to review past records and claims submissions.

OSU Health Plan requires fully documented treatment plan and SOAP notes for each visit billed to include:

- 1. Appropriate and legible SOAP chart notes documentation.
- 2. Progress reports and notes which document the following:
 - a. Diagnosis or diagnoses must support the level of care provided.
 - b. Medical necessity of the care provided must be demonstrated and may be subject to review (see criteria below).
 - c. Procedures performed must be within the scope of licensure as defined by the appropriate licensing boards within Ohio or the state in which the procedure is performed.

The OSU Health Plan considers chiropractic services medically necessary when all of the following criteria are met:

- The member has a neuromusculoskeletal disorder that is covered in this policy; and
- The medical necessity for treatment is clearly documented; and
- Improvement is documented within the initial 2 weeks of chiropractic care.

If no improvement is documented within the initial 2 weeks, additional chiropractic treatment is considered not medically necessary unless the chiropractic treatment is modified.

If no improvement is documented within 30 days despite modification of chiropractic treatment, continued chiropractic treatment is considered not medically necessary.

Once the maximum therapeutic benefit has been achieved, continuing chiropractic treatment is considered not medically necessary.

Maintenance chiropractic manipulation is not covered.

PRIOR AUTHORIZATION

Prior authorization is not required for chiropractic services. However, OSU Health Plan may request treatment plans and progress notes for medical review. We reserve the right to review past records and claims submissions.

EVALUATION AND MANAGEMENT SERVICES

A new patient evaluation and management (E&M) service is eligible for reimbursement in addition to the Chiropractic Manipulative Therapy (CMT 98940-98943) once per every three years. Providers billing a new E&M service must be from a different practice if billing sooner than three years.

Established patient E&M codes (9921X) may be used every 4 weeks thereafter if the member's condition requires above and beyond the usual pre-service and post-services associated with the procedure. An established patient E&M code may be used more frequently than every 4 weeks for a change in the member's condition (i.e., different diagnosis). The appropriate modifier (-25) must be used to indicate an E&M code is being used along with the additional chiropractic manipulative treatments (CMT) being addressed. Medical records to support the additional E&M service may be requested and the provider shall make these records available upon request. Any other services apart from an E&M service provided on the same day by the same provider in addition to the Chiropractic treatment will be reviewed separately for medical necessity.

MODALITIES

Up to two therapeutic modalities (e.g. ultrasound, hot packs, and electrical muscle stimulation 97XXX, G0283) may be billed in additional to CMT. Radicular symptoms (sciatica, brachial neuralgia) may justify traction as a third modality.

PHYSICAL THERAPY SERVICES

Physical therapy not performed at the time of chiropractic treatment, and not billed in the chiropractic E&M or CMT fee is not covered unless the site is an approved PAR provider for physical therapy services according to the OSU Faculty and Staff Health Plans Specific Plan Details Document. Group therapy is not covered (ie, CPT 97150).

X-RAY SERVICES

Regional X-rays may be appropriate on the first visit with the following conditions and if same X-rays were not already performed recently:

- History of previous trauma to the same body region
- History of fracture, neoplasm or arthritis in the same region
- History of cancer that could conceivably metastasize to the involved region
- Elderly patients
- Suspicion of osteoporosis

Follow up x-rays are rarely appropriate unless there has been a new injury, change in condition or failure to respond to treatment. <u>Requests for follow up x-rays and/or full spine x-rays will prompt a file review.</u>

DURABLE MEDICAL EQUIPMENT

Standard over the door traction (HCPC code E0942) can be dispensed by a Chiropractor if included in the provider's contract. All other DME must be provided by a participating approved DME Provider.

LEVELS AND FREQUENCY OF CODES

Frequent use of higher level codes (99214, 99215, 99204, 99205, 98942, 98943) may prompt a file review. Use of 98943 alone should be denied as provider liability.

The network average is expected to be 8-10 visits per case. An excessive number of visits may prompt a file review. OSU Health Plan reserves the right to review past records and claims submissions to determine medical necessity.

BENEFIT/COVERAGE ISSUES

Refer to The Ohio State University Faculty and Staff Health Plans Specific Plan Details Document.

RELATED CPT CODES

98940	Chiropractic manipulative treatment (CMT); spinal, one to two regions.
98941	spinal, three to four regions
98942	spinal, five regions
98943	extraspinal, one or more regions

DIAGNOSES WHICH MAY SUPPORT MEDICAL NECESSITY

ICD-10 Codes covered if selection criteria are met:

Information in the [brackets] below has been added for clarification purposes.

Codes requiring a	7th character are represented by "+"
004.0	

G24.3	Spasmodic torticollis
G54.0 – G55	Nerve root and plexus disorders
G56.00 – G56.93	Mononeuritis of upper limb
G57.00 – G59	Mononeuritis of lower limb
G71.0 – G72.9	Primary disorders of muscles and other myopathies
G80.0 – G80.9	Cerebral palsy
M05.00 – M08.99	Rheumatoid arthritis and other inflammatory
	polyarthropathies
M12.00 – M13.89	Other and unspecified arthropathies
M15.0 – M19.93	Osteoarthritis and allied disorders
M20.001 – M25.9	Other joint disorders
M35.3	Rheumatism, shoulder lesions and enthesopathies
M75.00 – M79.9	[excludes back]
M40.00 – M40.57, M42.00 –	Deforming dorsopathies, spondylitis and other
M54.9	Dorsopathies [excluding scoliosis]
M85.30 – M85.39	Osteitis condensans
M89.00 – M89.09	Algoneurodystophy
M91.10 – M94.9	Osteochondropathies
M95.3	Acquired deformity of neck
M95.5	Acquired deformity of pelvis
M95.8	Other specified acquired deformities of musculoskeletal system
M95.9	Acquired deformities of musculoskeletal system, unspecified
M99.00 – M99.09	Segmental and somatic dysfunction
M99.10 – M99.19	Subluxation complex (vertebral)
M99.83 – M99.84	Other acquired deformity of back or spine
Q65.00 – Q68.8	Congenital musculoskeletal deformities
Q72.70 – Q72.73, Q74.1 –	Congenital malformations of lower limb, including
Q74.2	pelvic girdle
Q74.0, Q74.9, Q87.89	Congenital malformations of upper limb, including shoulder girdle
Q76.0 – Q76.49	Congenital malformations of spine
Q77.0–Q77.1	Osteochondropdysplasia
Q77.4 – Q77.5	

Q77.7 – Q77.9 Q78.9	
S13.0XX+ - S13.9XX+, S23.0XX+ - S23.9XX+, S33.0XX+ - S33.9XX+, S43.001+ - S43.92X+, S53.001+ - S53.499, S63.001+ - S63.92X+, S73.001+ - S73.199+, S83.001 - S83.92X+, S93.01X+ - S93.699+	Dislocation and sprains of joints and ligaments
S14.2XX+ - S14.9XX+, S24.2XX+ - S24.9XX+, S34.21X+ - S34.9XX+	Injury to nerve roots and spinal plexus
S16.1XX+	Strain of muscle, fascia and tendon at neck level
S23.41X+ - S23.429+, S33.4XX+, S33.8XX+ - S33.9XX+	Sprain of other ribs, sternum and pelvis
S29.002+, S29.012+, S29.092+	Injury or strain of muscle, fascia and tendon of thorax
S39.002+, S39.012+, S39.092+	Injury or strain of muscle, fascia and tendon of lower back
S44.00X+ - S44.92X+	Injury of nerves at shoulder and upper arm level
S46.011+ - S46.019+, S46.111+ - S46.119+, S46.211+ - S46.219+, S46.311+ - S46.319+, S46.811+ - S46.819+, S46.911+ - S46.919+	Injury of muscle, fascia and tendon at shoulder and upper arm level
S74.00X+ - S74.92X+	Injury of nerves at hip and thigh level
S76.011+ - S76.019+, S76.111+ - S76.119+, S76.211+ - S76.219+, S76.311+ - S76.319+, S76.811+ - S76.819+, S76.911+ - S76.919+	Injury of strain of muscle, fascia and tendon at hip and thigh level
S84.00X+ - S84.92X+	Injury of nerves at lower leg level
S86.011+ - S86.019+, S86.111+ - S86.119+, S86.211+ - S86.219+, S86.311+ - S86.319+, S86.811+ - S86.819+, S86.911+ - S86.919+	Injury of muscle, fascia and tendon at lower leg level
S94.011+ - S94.019+, S94.111+ - S94.119+, S94.211+ - S94.219+, S94.311+ - S94.319+, S94.811+ - S94.819+, S94.911+ - S94.919+	Injury of nerves at ankle and foot level
S96.011+ - S96.019+, S96.111+ - S96.119+, S96.211+ - S96.219+, S96.311+ - S96.319+, S96.811+ - S96.819+, S96.911+ - S96.919+	Injury of muscle, fascia and tendon at ankle and foot level

EXPERIMENTAL AND INVESTIGATIONAL

The OSU Health Plan considers chiropractic services experimental and investigational for all other indications, including but not limited to any of the following conditions, because there is inadequate scientific research assessing the efficacy of chiropractic services compared with placebo, sham chiropractic or other modalities of treatment in these conditions:

Asthma	Migraine
Attention deficit hyperactivity disorder	Nocturnal enuresis
Autism	Otitis media
Cervicogenic headache	Pervasive developmental disorder
Colic	Post traumatic seizures
Chronic obstructive pulmonary disease	Premenstrual symptoms
Depression	Scoliosis [and kyphoscoliosis], idiopathic;
Diseases of the digestive system	resolving infantile idiopathic scoliosis;
Disorders of the foot and ankle	and progressive infantile idiopathic
Dysmenorrhea	scoliosis
Epilepsy and recurrent seizures	Temporomandibular joint disorder
Hypertension	Tension headache
Infertility	Unspecified convulsions [seizure disorder
Improvement of brain function	NOS]
Maternal care for breech presentation	Vertigo
Menopausal and female climacteric states	.
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The OSU Health Plan considers the following chiropractic procedures experimental and investigational:

Active Release Technique	IntraDiscNutrosis program
Active Therapeutic Movement (ATM2)	Koren Specific Technique
Advanced Biostructural Correction (ABC)	Manipulation for infant colic
Chiropractic Technique	Manipulation for internal (non-
Applied Spinal Biomechanical Engineering	neuromusculoskeletal) disorders
Atlas Orthogonal Technique	(Applied Kinesiology)
Bioenergetic Synchronization Technique	Manipulation Under Anesthesia
Biogeometric Integration	Moire Contourographic Analysis
Blair Technique	Network Technique
Bowen Technique	Neural Organizational Technique
Chiropractic Biophysics Technique	Neuro Emotional Technique
Coccygeal Meningeal Stress Fixation	NUCCA (National Upper Cervical
Technique	Chiropractic Association) procedure
ConnecTX (an instrument-assisted	Origin Insertion Release Technique
connective tissue therapy program)	Positional release therapy
Cox decompression manipulation/	Sacro-Occipital Technique
technique	Spinal Adjusting Devices (ProAdjuster,
Cranial Manipulation	PulStarFRAS, Activator)
Directional Non-Force Technique	Therapeutic (Wobble) Chair
FAKTR (Functional and Kinetic Treatment	Upledger Technique and Cranio-Sacral
with Rehab) Approach	Therapy
Gonzalez Rehabilitation Technique	Vertebral Axial Decompression (VAX-D)
Inertial traction (inertial extensilizer	Webster Technique (for breech babies)
decompression table)	Whitcomb Technique

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