

PROVIDER BULLETIN

Provider information



November 7, 2013

Medicare coverage of chiropractic services to treat acute or chronic subluxation

Blue Cross and Blue Shield of Minnesota (Blue Cross) provides services to Medicare Beneficiaries under the Medicare program offered as Platinum BlueSM (Cost). Medicare covered services must be provided according to the coverage guidelines established by Medicare. All eligible health services (including medical care, services, supplies, and equipment) *must* be medically necessary.

Chiropractic services

Only manual manipulation of the spine to correct subluxation is a covered service.

Medicare does not consider chiropractic maintenance therapy as medically necessary, and therefore these services are not payable under the Medicare program. Blue Cross will apply the Medicare guidelines outlined in the Medicare Benefit Policy for the Platinum Blue product effective January 1, 2014.

Effective January 1, 2014, Blue Cross will deny claims for active/corrective therapy (HCPCS codes 98940, 98941, and 98942) that **do not** contain the AT (acute treatment) procedure modifier. Services that are submitted without this procedure modifier will be considered maintenance therapy and are not considered medically necessary under Medicare. The liability will rest with the subscriber only if a valid Centers for Medicare & Medicaid Services (CMS) signed Advanced Beneficiary Notice (ABN) is on file and the claim is submitted with the GA procedure modifier.

These rules apply to the Platinum Blue Individual Complete, Choice and Core and to the Platinum Blue groups Plan A, B and C.

Coding requirements reminder

All coding and reimbursement is subject to changes, updates, or other requirements of coding rules and guidelines. All codes are subject to federal HIPAA rules, and in the case of medical code sets (for example, HCPCS, CPT, ICD-9-CM), only valid codes for the date of service may be submitted or accepted.

Additional information

Please refer to the Medicare website at medicare.gov for additional information.

Below are some Medicare references:

Medicare Benefit Policy Manual (MBPM) §100-02-30.5 - Medicare Carrier Manual (MCM) B3-2020.26;

CMS Pub.100.2 Chapter. 15 §240 - 240.1.5;

CMS PUB 100.4 Chapter 12 § 220;

CMS PUB 100-04, Medicare Claims Processing Manual, Chapter 23, section 20.9.1.1

Questions?

If you have questions, please contact provider services at (651) 662-5200 or toll free at 1-800-262-0820.

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