

Chiropractic Coding & Compliance Alert

Reader Question: Are You Billing For Maintenance Therapy?

Question: Knowing that Medicare does not pay for maintenance services, how do I find out when my rendered services in the continuum of patient care turn into maintenance therapy as per Medicare?

Illinois Subscriber

Answer: One has to be careful so as not to tread into this zone as you enthusiastically treat the patient. Medicare defines maintenance therapy as "a treatment plan that seeks to prevent disease, promote health, and prolong and enhance the quality of life; or therapy that is performed to maintain or prevent deterioration of a chronic condition."

Talking about chronic subluxation and its treatment in the Medicare Benefits Policy Manual (Chapter 15, section 240.1.3), Medicare also states that, "once the clinical status has remained stable for a given condition, without expectation of additional objective clinical improvements, further manipulative treatment is considered maintenance therapy and is not covered."

Always remember to place an AT modifier (Acute treatment) on a claim while providing treatment for acute or chronic subluxation. However, this may not in all instances indicate that the service is reasonable and medically necessary. The payers may decide on this after medical review as appropriate.