

Chiropractic Coding & Compliance Alert

Reader Question: Fortify Your Documentation to Justify 98942

Question: Our Medicare contractor is auditing claims with 98942. Do you have any suggestions for a template for documentation to warrant the use of 98942?

North Dakota Subscriber

Answer: Using the code 98942 (Chiropractic manipulative treatment [CMT]; spinal, 5 regions) indicates that your DC determined that it was medically necessary to adjust all five of the spinal regions. The documentation needs to reflect that fact, including that the patient had complaints in all five regions.

Code 98942 is most sought after by auditors because recent reviews by the OIG suggest upcoding practices to be on the rise, and of all the CMT codes, this code pays the most. Therefore, if you are thinking of billing 98942, be sure you are able to positively establish medical necessity for each area of the spine you treat. So, each area should have adequate documentation such as patient complaint, assessment findings necessitating CMT, and a crystal clear treatment plan and follow-up reports with objectively measurable progress.