

Chiropractic Coding & Compliance Alert

Reader Question: How to Report Additional Diagnoses in the CMS 1500 Form

Question: How do I report other diagnoses associated with the primary diagnosis of subluxation in the Item 21 of the CMS 1500 form?

Mississippi Subscriber

Answer: For chiropractic claims, use an ICD-9-CM code in the 739 (Nonallopathic lesions not elsewhere classified) series specifying subluxation for the primary diagnosis. Include a secondary ICD-9-CM for the symptoms associated with the diagnosis of subluxation, which can be found in the local coverage determination (LCD) of your Medicare contractor. You can use up to four ICD-9-CM codes.

Although Item 21 can only contain the diagnoses for two regions treated and its corresponding symptoms, the clinical record **MUST** document the additional primary and secondary diagnoses justifying treatment of the additional regions billed.

Remember: The new claim form allows for up to 12 Dx codes.