

Chiropractic Coding & Compliance Alert

Reader Question: Is Advance Beneficiary Notice a Way Out for Non-Medicare Services?

Question: I often get patients who require services other than chiropractic manipulation, which is my only covered service under Medicare. How do I get paid for services that are not covered under Medicare?

Arizona Subscriber

Answer: For services not covered under Medicare, you need not bill to Medicare. The patient usually will have to bear the costs as well as the liability for those services. The patient can sign an Advance Beneficiary Notice in such cases to acknowledge responsibility for payment. You may then bill the chiropractic code with modifier GA (Waiver of liability statement issued as required by payer policy, individual case). Although Medicare would not pay for this, it will at least recognize the patient's responsibility for the services.

Some patients may have a secondary insurance that has a provision for excluded services.

Bill such services to Medicare with modifier GY (Item or service statutorily excluded, does not meet the definition of any Medicare benefit or, for non-Medicare insurers, is not a contract benefit) to indicate patient liability for those services and allow payment from a secondary payer.