

Chiropractic Coding & Compliance Alert

Reader Question: Is Twelve Weeks the Maximum Time For Chiropractic Care?

Question: Is it true that a provider cannot bill for chiropractic care for more than twelve weeks? Somebody told that it gets counted under maintenance services beyond that. Please advice.

Minnesota Subscriber

Answer: There is a logical rationale that the length of treatment should be justifiable by the diagnosis of the condition. Apart from that, Medicare does not impose any caps or limits as such for covered chiropractic care rendered by chiropractors who meet Medicare's licensure and other requirements as specified in the Medicare Benefit Policy Manual, Chapter 15, Section 30.5.

Remember: The claims contractor may have Review Screens (defined by CMS as "numbers of visits at which the Medicare Carrier or A/B MAC might require a review of documentation before allowing further care"). If you have impeccable documentation and a genuine diagnosis, that should not be a problem.