

Chiropractic Coding & Compliance Alert

Reader Questions: When Can Chiropractors Bill 99211?

Question: A patient comes in for a follow-up visit, but no adjustment is performed. Can we bill 99211 for this visit?

Idaho Subscriber

Answer: We rarely see 99211 being used in a chiropractic setup. Actually, 99211 (Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem[s] are minimal. Typically, 5 minutes are spent performing or supervising these services) is also known as the nurse code. It may be used for a visit where the nurse just records the blood pressure or records patient response to the ongoing treatment.

This code bundles into the CMT codes, so do not use it along with same day chiropractic manipulative treatment, unless and until you can justify it as being separately identifiable. Do not err by submitting 99211 for therapy supervised by a non-physician personnel.

So, 99211 would be rarely used in a chiropractic office, for a low complexity examination of a regular patient. Even for a simple re-evaluation, 99212 would be more appropriate than 99211. 99211 only requires a presenting problem and does not necessitate the use of any of the three key components of E/M.

You may think of 99211 when a patient comes for a follow-up visit and no CMT is performed, such as when your assistant gathers some information from the patient and records it on the chart.