

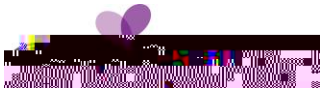


- A. Subject
Chiropractic Care

- B. Background

The REIMBURSEMENT Policy Statement detailed above has received due consideration as defined in the REIMBURSEMENT Policy Statement Policy and is approved.

Chiropractic Care-OH MP-PY-1445
Effective Date:



7. 72074 ±RE, spine; thoracic, minimum of 4 views
8. 72080 ±RE, spine; thoracolumbar junction, minimum of 2 views
9. 72081 ±RE, spine, entire thoracic and lumbar, including skull, cervical and sacral spine if performed (e.g., scoliosis evaluation); one view
10. 72082 ±RE, spine, entire thoracic and lumbar, including skull, cervical and sacral spine if performed (e.g., scoliosis evaluation); 2 or 3 views
11. 72083 ±RE, spine, entire thoracic and lumbar, including skull, cervical and sacral spine if performed (e.g., scoliosis evaluation); 4 or 5 views
12. 72084 ±RE, spine, entire thoracic and lumbar, including skull, cervical and sacral spine if performed (e.g., scoliosis evaluation); minimum of 6 views
13. 72100 ±RE, spine, lumbosacral; 2 or 3 views
14. 72110 ±RE, spine, lumbosacral; minimum of 4 views
15. 72114 ±RE, spine, lumbosacral; complete, including bending views, minimum of 6 views
16. 72120 ±RE, spine, lumbosacral; bending views only, 2 or 3 views
17. 72170 ±RE, pelvis; 1 or 2 views
18. 72190 ±RE, pelvis; complete, minimum of 3 views
19. 72200 ±RE, sacroiliac joints; less than 3 views
20. 72202 ±RE, sacroiliac joints; 3 or more views
21. 72220 ±RE, sacrum and coccyx, minimum of 2 views
22. 73000 ±RE; clavicle, complete
23. 73010 ±RE; scapula, complete
24. 73020 ±RE, shoulder; 1 view
25. 73030 ±RE, shoulder; complete, minimum of 2 views
26. 73050 ±RE; acromioclavicular joints, bilateral, with or without weighted distraction
27. 73501 ±RE, hip, unilateral, with pelvis when performed; 1 view
28. 73502 ±RE, hip, unilateral, with pelvis when performed; 2-3 views
29. 73503 ±RE, hip, unilateral, with pelvis when performed; minimum of 4 views
30. 73521 ±RE, hips, bilateral, with pelvis when performed; 2 views
31. 73522 ±RE, hips, bilateral, with pelvis when performed; 3-4 views
32. 73523 ±RE, hips, bilateral, with pelvis when performed; minimum of 5 views
33. 73551 ±RE, femur; 1 view
34. 73552 ±RE, femur; minimum 2 views

IX. Codes that may be covered but require a prior authorization:

- A. 97010 ±hot or cold packs
- B. 97012 ±traction
- C. 97014 ±electrical stimulation
- D. 97035 ±ultrasound
- E. 97139 ±unlisted therapeutic procedure
- F. 97140 ±manual therapy technique

X. Exclusions/services not covered for Chiropractors:

- A. 20560 ±needle insertion(s) without injection(s); 1 or 2 muscle(s)-dry needling
- B. 20561 ±needle insertion(s) without injection(s); 3 or more muscles-dry needling

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