



February 15, 2008

Re: Chiropractic Treatment for ODS Advantage and PERS ODS Advantage Members – revised guidelines

Dear Office Manager and/or Billing Supervisor:

This letter is intended to help clarify coding and processing of covered and non-covered portions of Chiropractic treatment for ODS Advantage and PERS ODS Advantage (subsequently referred to as simply “ODS Advantage”) Members.

ODS Advantage covers benefits for:

Acute or Active/Corrective Chiropractic Treatment

To appropriately designate active/corrective therapy:

- Use an AT modifier for every claim that uses HCPCS codes 98940, 98941, or 98942.
- Two diagnoses are required on every claim that indicate:
 - The precise level of the subluxation must be listed as the primary diagnosis.
 - The resulting disorders are to be listed as the secondary diagnosis.

As always, ODS Companies may deny your claim, if appropriate, after medical review.

Chapter 15, Section 30.5 of the Medicare Benefits Policy Manual states that the Medicare program does not consider chiropractic maintenance therapy as medically reasonable or necessary, and it is not payable under the Medicare program. Therefore, you **must** place an AT modifier on a claim when providing active/corrective treatment to treat acute or chronic subluxation. Services for active/corrective therapy that do not contain the AT modifier will be denied. Services without modifier AT will be considered maintenance therapy (services that seek to prevent disease, promote health, and prolong and enhance the quality of life; or maintain or prevent deterioration of a chronic condition) and are not considered medically reasonable or necessary under Medicare.

If you have additional questions or concerns, please do not hesitate to contact one of our Customer Service Representatives at (list Advantage & PERS Advantage CS numbers).

Sincerely,

ODS Medicare Advantage Customer Service
PERS Advantage 877-299-9061
ODS Advantage 877-299-9062

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