ChiroCredit.com™ / OnlineCE.com presents
Documentation 101 – Part 4 of 10
Instructor:  Paul Sherman, DC

Important Notice: This download is for your personal use only and is protected by applicable copyright laws©. Its use is governed by our Terms of Service on our website (click on ‘Policies’ on our website’s side navigation bar).

SPECIFIC CMT CODES FOR CHIROPRACTIC MANIPULATIVE TREATMENT:
98940-Spinal manipulation 1 to 2 regions
98941-Spinal manipulation 3 to 4 regions
98942-Spinal manipulation 5 regions
98943-Extraspinal 1 or more regions

SPECIFIC CMT CODE DESCRIPTORS:
Note: These codes are based upon the number of body regions receiving manipulation.
1. Cervical Spine-includes atlanto-occipital joint and C1 through C7.
2. Thoracic Spine-includes T1 through T12 and posterior ribs (costotransverse and costovertebral junction).
3. Lumbar Spine-includes L1 through L5.
4. Sacral-includes sacrum and sacrococcygeal junction.
5. Pelvic-includes sacroiliac joint and other pelvic articulations.
6. Extra-Spinal-which are further broken down as follows.
   a). Head-includes head and TMJ.
   b). Lower Extremities-includes hip, knee, leg, ankle and foot.
   c). Upper Extremities-includes shoulder, arm, elbow, wrist and hand.
   d). Rib Cage-includes anterior rib cage and costosternal junction.
   e). Abdomen

THREE COMPONENTS OF CMT:
Note: Documenting the CMT code requires a certain work value, which consists of a pre-service, intra-service and post-service component.

Pre-Service:
- Review data previously collected i.e.: C/C, HX, PE, test findings as well as patient’s previous response to treatment.
Intra-Service:
- Assessment of patient before adjustment i.e.: changes since last visit, assessment of any new complaints, mechanical assessment, and correlation of exam findings, diagnosis and assessment/modifications of current treatment plan.
- Discussion with patient regarding pre and post effects of treatment.

Post-Service:
- Documenting medical information in the record i.e.: progress notes (SOAP/PART) and all communication with other providers as well as arranging consults/referrals, scheduling tests, updating diagnoses and/or treatment plans and assessing the literature when appropriate and necessary.

SPECIFIC PRIMARY ICD-10-CM CODES FOR MEDICARE REIMBURSEMENT:
These are the Non-allopathic codes and are specifically used for documenting the primary diagnosis (subluxation). When submitting to Medicare be certain the claim lists the primary diagnosis (subluxation) code first in box 21 of the CMS 1500 form (formerly HCFA 1500 form) followed by the secondary diagnosis (medical) code.

Primary ICD-10-CM Codes: Non-allopathic Lesions
- M99.00-Segmental and somatic dysfunction, Head region (occipito-cervical)
- M99.10-Subluxation complex (vertebral), Head region
- M99.01-Segmental and somatic dysfunction, Cervical region
- M99.11-Subluxation complex (vertebral), Cervical region
- M99.02-Segmental and somatic dysfunction, Thoracic region
- M99.12-Subluxation complex (vertebral), Thoracic region
- M99.03-Segmental and somatic dysfunction, Lumbar region
- M99.13-Subluxation complex (vertebral), Lumbar region
- M99.04-Segmental and somatic dysfunction, Sacral region
- M99.14-Subluxation complex (vertebral), Sacral region
- M99.05-Segmental and somatic dysfunction, Sacroiliac, hip, pubic regions
- M99.15-Subluxation complex (vertebral), Pelvic region

SPECIFIC SECONDARY INTERNATIONAL CLASSIFICATION OF DISEASES, 10th REVISION, CLINICAL MODIFICATION CODES (ICD-10-CM CODES) FOR MEDICARE REIMBURSEMENT:
Note: A minimum of two diagnoses are required on every Medicare claim.
1. The primary diagnosis indicating the precise level of subluxation must be listed first i.e.: M99.00, M99.10, M99.01, M99.11, M99.02, M99.12, M99.03, M99.13, M99.04, M99.14, M99.05, M99.15. If the claim does not have one of the primary diagnoses, the claim will be denied as not medically necessary.

2. The secondary diagnosis (neuromusculoskeletal condition/medical diagnosis) must be listed second i.e.: see enclosed list of approved Medicare ICD-10-CM Codes. If the claim does not have the secondary diagnosis code listed as per Medicare policy the claim will be denied.
Note: See list below of approved Medicare ICD-10-CM Codes for secondary diagnoses. Providers should also check with their specific Medicare carriers i.e.: Local Coverage Determination (LCD’s) to inquire if any additional ICD-10 codes are approved for Medicare reimbursement.

Please note, for all non-Medicare claims there are additional ICD-10-CM Codes approved for reimbursement and doctors should reference the Official Guide for ICD-10-CM Tabular List of Diseases and Injuries through the Center for Disease Control and Prevention (CDC).

**LIST OF APPROVED MEDICARE ICD-10-CM CODES FOR SECONDARY DIAGNOSIS:**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>G44.201</td>
<td>Tension-type headache, unspecified, intractable</td>
</tr>
<tr>
<td>G44.209</td>
<td>Tension-type headache, unspecified, not intractable</td>
</tr>
<tr>
<td>G54.0</td>
<td>Brachial plexus disorder. Thoracic Outlet Syndrome</td>
</tr>
<tr>
<td>G54.1</td>
<td>Lumbosacral plexus disorders</td>
</tr>
<tr>
<td>G54.2</td>
<td>Cervical root disorder, Not Elsewhere Classified (NEC)</td>
</tr>
<tr>
<td>G54.3</td>
<td>Thoracic root lesion, (NEC)</td>
</tr>
<tr>
<td>G54.4</td>
<td>Lumbosacral root disorders, (NEC)</td>
</tr>
<tr>
<td>G54.8</td>
<td>Other nerve root and plexus disorders</td>
</tr>
<tr>
<td>M46.02</td>
<td>Spinal enthesopathy, Cervical region</td>
</tr>
<tr>
<td>M46.03</td>
<td>Spinal enthesopathy, Cervicothoracic region</td>
</tr>
<tr>
<td>M46.04</td>
<td>Spinal enthesopathy, Thoracic region</td>
</tr>
<tr>
<td>M46.05</td>
<td>Spinal enthesopathy, Thoracolumbar region</td>
</tr>
<tr>
<td>M46.06</td>
<td>Spinal enthesopathy, Lumbar region</td>
</tr>
<tr>
<td>M46.07</td>
<td>Spinal enthesopathy, Lumbosacral region</td>
</tr>
<tr>
<td>M46.08</td>
<td>Spinal enthesopathy, Sacral and sacrococcygeal region</td>
</tr>
<tr>
<td>M46.09</td>
<td>Spinal enthesopathy, Multiple sites in spine</td>
</tr>
<tr>
<td>M47.812</td>
<td>Spondylosis without myelopathy or radiculopathy, cervical region</td>
</tr>
<tr>
<td>M47.813</td>
<td>Spondylosis without myelopathy or radiculopathy, cervicothoracic region</td>
</tr>
<tr>
<td>M47.814</td>
<td>Spondylosis without myelopathy or radiculopathy, Thoracic region</td>
</tr>
<tr>
<td>M47.815</td>
<td>Spondylosis without myelopathy or radiculopathy, Thoracolumbar region</td>
</tr>
<tr>
<td>M47.16</td>
<td>Other spondylosis with myelopathy, Lumbar region</td>
</tr>
<tr>
<td>M47.819</td>
<td>Spondylosis without myelopathy or radiculopathy, site unspecified</td>
</tr>
<tr>
<td>M50.21</td>
<td>Other cervical disc displacement, high cervical region. Other C2-C3 cervical disc displacement and other C3-C4 cervical disc displacement</td>
</tr>
<tr>
<td>M51.26</td>
<td>Other intervertebral disc displacement, lumbar region.</td>
</tr>
<tr>
<td>M51.27</td>
<td>Other intervertebral disc displacement, lumbosacral region.</td>
</tr>
<tr>
<td>M51.16</td>
<td>Intervertebral disc disorders with radiculopathy (sciatica), lumbar region.</td>
</tr>
<tr>
<td>M51.17</td>
<td>Intervertebral disc disorders with radiculopathy (sciatica). Lumbosacral region.</td>
</tr>
<tr>
<td>M51.24</td>
<td>Other intervertebral disc disorder, thoracic region.</td>
</tr>
<tr>
<td>M51.25</td>
<td>Other intervertebral disc disorder, thoracolumbar region.</td>
</tr>
</tbody>
</table>
Excludes 1: lumbar radiculitis (M54.16), sciatica (M54.3)

M51.14 Intervertebral disc disorders with radiculopathy, thoracic region.
Excludes 1: lumbar radiculitis (M54.16), sciatica (M54.3)

M51.15 Intervertebral disc disorders with radiculopathy, thoracolumbar region.
Excludes 1: lumbar radiculitis (M54.16), sciatica (M54.3)

M50.30 Other cervical disc degeneration, Cervical region

M50.33 Other cervical disc degeneration, Cervicothoracic region

M51.34 Other intervertebral disc degeneration, Thoracic region

M51.35 Other intervertebral disc degeneration, Thoracolumbar region

M51.36 Other intervertebral disc degeneration, Lumbar region

M51.37 Other intervertebral disc degeneration, Lumbosacral region

M96.1 Post laminectomy syndrome, (NEC)

M46.41 Discitis, unspecified, Occipital-atlanto-axial region

M46.42 Discitis, unspecified, Cervical region

M46.43 Discitis, unspecified, Cervicothoracic region

M50.80 Other cervical disc disorders, Cervical region

M50.83 Other cervical disc disorders, Cervicothoracic region

M50.90 Cervical disc disorder, unspecified, Cervical region

M50.93 Cervical disc disorder, unspecified, Cervicothoracic region

M48.02 Spinal stenosis, Cervical region

M48.03 Spinal stenosis, Cervicothoracic region

M54.2 Cervicalgia

M53.0 Cervicocranial syndrome

M53.1 Cervicobrachial syndrome

M54.12 Radiculopathy, Cervical region

M54.13 Radiculopathy, Cervicothoracic region

M43.6 Torticollis

M48.04 Spinal stenosis, Thoracic region

M48.05 Spinal stenosis, Thoracolumbar region

M48.06 Spinal stenosis, Lumbar region

M48.07 Spinal stenosis, Lumbosacral region

M48.08 Spinal stenosis, Sacral and sacrococcygeal region

M724.1 Pain in thoracic spine

M54.41 Lumbago with sciatica right side

M54.42 Lumbago with sciatica left side

M54.5 Low back pain

M54.31 Sciatica right side

M54.32 Sciatica left side

M54.14 Radiculopathy, Thoracic region

M54.15 Radiculopathy, Thoracolumbar region

M54.16 Radiculopathy, Lumbar region

M54.17 Radiculopathy, Lumbosacral region

M54.18 Radiculopathy, Sacral and sacrococcygeal region

M54.89 Other Dorsalgia

M54.9 Back pain (NOS)

M43.27 Fusion of the spine, lumbosacral region
Excludes 1: Ankylosing spondylitis (M45.0-), congenital fusion of the spine
Excludes 2: arthrodesis status (Z98.1), pseudo arthrosis after fusion or arthrodesis

M43.28  Fusion of spine, sacral and sacrococcygeal region
Excludes 1: Ankylosing spondylitis (M45.0-), congenital fusion of the spine
Excludes 2: arthrodesis status (Z98.1), pseudo arthrosis after fusion or arthrodesis

M53.2X7  Spinal instabilities, lumbosacral region
M53.3  Sacroccocygeal disorders, (NEC). Coccygodynia
M79.609  Pain in unspecified limb
M40.299  Other kyphosis, site unspecified
M40.50  Lordosis, unspecified, site unspecified
M41.40  Neuromuscular scoliosis, site unspecified
M41.50  Other secondary scoliosis, site unspecified
M43.8X9  Other specified deforming dorsopathies, site unspecified
M43.00  Spondylolysis, site unspecified.
Excludes 1: congenital spondylolysis (076.2), spondylolisthesis (M43.1)

Q76.2  Spondylolisthesis (Congenital)
Excludes 1: Acquired spondylolisthesis (M43.1-), Acquired spondylolysis (M43.0-)

R51  Headache
G44.1  Vascular Headache, not elsewhere classified
S33.8XXA  Sprain of other parts of lumbar spine and pelvis, initial encounter
S33.6XXA  Sprain of sacroiliac joint, initial encounter
S33.8XXA  Sprain of other parts of lumbar spine and pelvis, initial encounter
S13.4XXA  Sprain of ligaments of the cervical spine, initial encounter.
S13.8XXA  Sprain of joints and ligaments of the other parts of the neck, initial encounter
S23.XXX  Sprain of ligaments of the thoracic spine, initial encounter
S23.8XXA  Sprain of other specified parts of the thorax, initial encounter
S33.5XXA  Sprain of ligaments of lumbar spine, initial encounter
S33.8XXA  Sprain of other parts of lumbar spine and pelvis, initial encounter