

## NOTICE OF MEDICARE COVERAGE FOR CHIROPRACTIC CARE

Medicare Part B allows for chiropractic coverage, though this coverage is limited. The box below describes specific information regarding your chiropractic benefits and limitations.

Medicare Part B guidelines limit reimbursement to chiropractic treatment of acute and chronic subluxations for which medical necessity has been clearly established. This notice pertains only to Medicare-covered chiropractic service codes 98940, 98941 & 98942.

*Medicare Benefit Policy Manual, Chapter 15 - Transmittal 240.1.3*

Medicare will allow payment for only those chiropractic services described in the box above. As long as the patient is improving and there is reasonable expectation for continued improvement, Medicare will likely continue to allow payment for those services.

Other services provided by a Doctor of Chiropractic are deemed "Non-Covered" by Medicare. Examples include, but are not limited to, the following:

### Examples of Non-Covered Services

#### *Services other than Chiropractic adjustments*

- Office Visits/Exams—services used to evaluate, manage, re-evaluate, advise or give counsel regarding your health.
- Adjunctive Procedures—e.g. massage, traction, electrical stimulation, neuromuscular re-education
- X-rays, Lab tests, Supplies, Supplements

#### *Other Chiropractic treatments*

- Non-spinal manipulation—e.g., knee, foot, shoulder, wrist
- Maintenance and Preventative Care—the patient is stable and no further improvement is expected.
- Wellness Care to promote better health

***Medicare does NOT pay for non-covered services.***

### Acknowledgement

Information regarding Medicare Part B chiropractic benefits and limitations has been provided to me. I understand that I am personally **financially responsible** for all services that are not covered by Medicare, including applicable deductibles and co-insurance.

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*Signature of patient or authorized guardian*

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*Date*