



January 16, 2008

WASHINGTON
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CHIROPRACTIC
ASSOCIATION

Dear Insurance Representative:

While preparing for the Washington State Chiropractic Association 2008 Winter Conference the WSCA Insurance Committee and Board of Directors have identified some questions that we would like a response to in an effort to educate our members. It was our goal that we would have delivered this to you in a time frame that would be sufficient to respond to prior to our convention however; due to our delay we recognize that this may be difficult. We would like you to respond to as many of our questions at our January 26, 2008 Winter Conference but if that is not possible we would respectfully request your reply, or a status of a reply, no later than February 29, 2008.

We have made an effort to break the questions, and positions down by category.

Delegation of Duties

It is the position of the WSCA that we defer to WAC 246 808-535, as provided by the Washington State Department of Health regarding the delegation of duties performed in a chiropractic clinic.

- > Based on this Washington Administrative Code, what is your position on reimbursement to chiropractors for the following services, defined by Current Procedural Code (CPT) that have been delegated to auxiliary staff:

97110-therapeutic exercise
97112- neuromuscular re-education
97116-gait therapy
97139-unlisted therapeutic procedure

- > Based on this Washington Administrative Code, what is your position on reimbursement to chiropractors for the following services, defined by Current Procedural Code (CPT) that have been delegated to regular senior students under the direct supervision and control of an approved preceptor:

97110-therapeutic exercise
97112- neuromuscular re-education
97116-gait therapy
97139-unlisted therapeutic procedure
97530-therapeutic activities
97535-self care/home management training

- > Based on this Washington Administrative Code, what is your position on reimbursement to chiropractors for the following services, defined by Current Procedural Code (CPT) that have been delegated to a clinical postgraduate trainee under the direct supervision and control of an approved preceptor:

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- 97110-therapeutic exercise
- 97112- neuromuscular re-education
- 97116-gait therapy
- 97139-unlisted therapeutic procedure
- 97140-manual therapy techniques
- 97530-therapeutic activities
- 97535-self care/home management training

Evaluation and Management, Brief Chart Notes Between E and M's

It is the position of the WSCA that we defer to Washington Administrative Code 246-808-560 regarding evaluation and management of a patient, initially and periodically for the appropriate documentation, assessment, diagnosis, and care management. It is also our position that chart notes on visit dates between evaluation and management visits of a patient may be brief as referenced in WAC 246-808-560(2).

- > What is your position related to brief chart notes on routine visits between periodic evaluations?
- > What is your policy regarding frequency of reimbursement of evaluation and management services and their related codes?

Medical Necessity

Definition:

It would be our expectation that there be consistency in the written definitions of medical necessity in provider contracts when compared to the patients benefit policy.

- > Do your definitions of medical necessity differ in the provider contract when compared to the consumer/patient contract? If so, how?
- > Do you **apply** the definition the same when making benefit determinations and provider payment decisions? If so, how?

Documentation obligations:

It is the position of the WSCA that medical necessity is best determined by the chiropractor and then demonstrated thru basic elements of patient evaluation and management that traditionally appear in the documentation of a chiropractic case. It is also our position that the issue payers/insurers have regarding medical necessity relates to adequate documentation that supports and demonstrates medical necessity.

- > Are there any issues associated with medical necessity, or is it an issue of documentation?

It is the position of the WSCA that chiropractors should be aware that the payer has a right, and the chiropractor has an obligation, to adequately document patient care to support and demonstrate medical necessity. It is also our position that the carrier has an obligation to provide chiropractors with **clear guidance** as to the elements of documentation that meet your expectations in the determination of medical necessity.

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> What are the required elements of documentation that demonstrate medical necessity?

Form and Format:

It is the position of the WSCA that chiropractors have a right to produce records and documentation in a format of individual preference that contains the necessary reasonable elements. A code legend may also be required so that a payer is able to interpret the patient record.

> Do you have a position regarding the form or format of documentation used by a chiropractor?

The above questions are those that have been identified as “pressing” to Washington State Chiropractors, and in need of clarity. There may be additional issues to address in the future but for now we encourage (your insurance company) to share their views with us on the previously mentioned subjects.

On behalf of the WSCA Insurance Committee and the Board of Directors, we would like to thank you for your time. If you have any questions please don’t hesitate to contact our Executive Director, Lori Bielinski at 206-878-6055.

Sincerely,

J. Michael Schweitzer, DC
WSCA President

cc: Matthew Waldron, DC
WSCA Insurance Committee Chair

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