



## Chiropractic Services for Adults - ACLA

In Lieu Of Policy ID: ILO.02

Recent review date: 2/2023

Next review date: 1/2024

### Policy contains: Chiropractic Services for Adults

*AmeriHealth Caritas has developed In Lieu Of policies to assist with making coverage determinations for medically appropriate services outside required MCO Covered Services or settings (or beyond the service limits established by LDH for MCO Covered Services. AmeriHealth Caritas' In Lieu Of services are provided to Enrollees, at their option, as a cost-effective alternative to an MCO Covered Service or Setting.*

*LDH has determined that this In Lieu Of service is a medically appropriate and cost-effective substitute for the MCO Covered Service or setting under the Louisiana Medicaid State Plan.*

## Coverage policy

Chiropractic services to diagnose and treat neuro-musculoskeletal conditions associated with the functional integrity of the spine are a medically appropriate and cost-effective substitute for services currently covered under the Louisiana Medicaid State Plan. In addition, Chiropractic providers are to identify and refer members who may benefit from care coordination and/or case management services to the ACLA Population Health Management team. This will include complex members who are diagnosed with multiple chronic diseases (i.e. Diabetes, CAD, Asthma) and have a history of high Emergency Room and/or Inpatient utilization.

Chiropractic services are medically appropriate and approved for members diagnosed with neuro-musculoskeletal conditions associated with the functional integrity of the spine. ACLA will have a cap of 300 total enrollees per year.

Service Name and Description: Adult Chiropractic Care - Chiropractic services to diagnose and treat neuro-musculoskeletal conditions associated with the functional integrity of the spine.

**Unit of Service:**

<u>Service Category</u>	<u>Code</u>	<u>Description</u>
<u>Evaluation and management – new patient</u>	<u>99202</u>	<u>Office or other outpatient visit for the evaluation and management of a new patient</u>
	<u>99203</u>	
	<u>99204</u>	
	<u>99205</u>	
<u>Evaluation and management – established patient</u>	<u>99212</u>	<u>Office or other outpatient visit for the evaluation and management of an established patient</u>
	<u>99213</u>	
	<u>99214</u>	
	<u>99215</u>	
<u>Spinal X-rays</u>	<u>72020</u>	<u>Radiologic examination, spine, single view, specify level</u>
	<u>72040</u>	<u>Radiologic examination, spine, cervical; 2 or 3 views</u>
	<u>72050</u>	<u>Radiologic examination, spine, cervical; 4 or 5 views</u>
	<u>72052</u>	<u>Radiologic examination, spine, cervical; 6 or more views</u>
	<u>72070</u>	<u>Radiologic examination, spine, thoracic, 2 views</u>
	<u>72072</u>	<u>Radiologic examination, spine, thoracic, 3 views</u>
	<u>72074</u>	<u>Radiologic examination, spine, thoracic, minimum of 4 views</u>
	<u>72080</u>	<u>Radiologic examination, spine, thoracolumbar, 2 views</u>
	<u>72100</u>	<u>Radiologic examination, spine, lumbosacral; 2 or 3 views</u>
	<u>72110</u>	<u>Radiologic examination, spine, lumbosacral; minimum of 4 views</u>
	<u>72114</u>	<u>Radiologic examination, spine, lumbosacral; complete, including bending views, minimum of 6 views.</u>
	<u>72120</u>	<u>Radiologic examination, spine, lumbosacral; bending views only, 2 or 3 views</u>
	<u>72220</u>	<u>Radiologic examination, sacrum and coccyx, minimum of 2 views</u>
<u>Spinal manipulation</u>	<u>98940</u>	<u>Spinal Manipulation 1-2 Regions</u>
	<u>98941</u>	<u>Spinal Manipulation 3-4 Regions</u>
	<u>98942</u>	<u>Spinal Manipulation 5 Regions</u>
<u>Other treatments‡</u>	<u>97012</u>	<u>Mechanical Traction</u>
	<u>97022</u>	<u>Whirlpool Therapy</u>
	<u>97035</u>	<u>Ultrasound Therapy</u>
	<u>97032</u>	<u>Electrical Stimulation</u>
	<u>97110</u>	<u>Therapeutic Exercises</u>
	<u>97112</u>	<u>Neuromuscular Reeducation</u>
	<u>97116</u>	<u>Gait Training</u>
	<u>97124</u>	<u>Massage Therapy</u>
	<u>97140</u>	<u>Manual Therapy</u>
	<u>20560</u>	<u>Needle insertion without injection 1-2</u>
	<u>20561</u>	<u>Needle insertion without injection 3 or more muscles</u>

The units of service vary per individualized treatment plans. Below shows the anticipated and maximum number of treatments per service category per member, based on symptom intensity. A maximum of two (2) other treatments, in addition to spinal manipulation, are covered per day of service. Treatment CPT codes listed in the table *Units of Service* above, but not in this table, will be included in this maximum of two other treatments per day of service.

<u>Symptom Intensity</u>	<u>Category</u>	<u>Maximum Services Rendered</u>
<u>Mild-to-Moderate</u>	<u>Overall description</u>	<u>Six treatment sessions over an 18-week period</u>
	<u>E/M</u>	<u>1x99203 + 5x99213</u>
	<u>X-ray</u>	<u>1x72100</u>
	<u>Spinal manipulation</u>	<u>6x98941</u>
	<u>Other treatments</u>	<u>3x97124</u>
<u>Moderate-to-Severe</u>	<u>Overall description</u>	<u>Twelve treatment sessions over a 26-week period</u>
	<u>E/M</u>	<u>1x99203 + 11x99213</u>
	<u>X-ray</u>	<u>1x72110</u>
	<u>Spinal manipulation</u>	<u>6x98941 + 6x98942</u>
	<u>Other treatments</u>	<u>12x97124 + 6x20560</u>
<u>Severe</u>	<u>Overall description</u>	<u>Eighteen treatment sessions over a 12-month period</u>
	<u>E/M</u>	<u>1x99203 + 17x99213</u>
	<u>X-ray</u>	<u>1x72110</u>
	<u>Spinal manipulation</u>	<u>18x98942</u>
	<u>Other treatments</u>	<u>18x97140 + 18x20561</u>

## Background

The Chiropractic in Lieu of service is needed to:

- Increase pain treatment alternatives
- Mitigate overutilization of Opioids
- Improve Provider Pain management prescribing behavior

## Reporting

Service Utilization reports will be requested to monitor program activities to include member profiles, provider, and case management referrals. Chiropractic providers will be encouraged to coordinate with Case Management and suggest participating in case rounds on an as needed basis.

## Expected Outcomes

Anticipated outcomes for members participating in the ILO:

- Reduction in ER Utilization for reasons of pain
- Improve HEDIS rates for ER (reduce ER utilization)
- Increased Care Management engagement to address pain management
- Reduce opioid dependency; reduce opioid prescription fill rates
- Reduce All Cause Readmissions

## Policy updates

2/2023: initial review date and ILO policy effective date: 2/2023