So…what’s the deal with Spinal Decompression Therapy and Insurance Reimbursement?

I hear this question just about everyday and it’s a simple question, but there’s no simple answer. It was about one year ago when I started researching the topic of Insurance Reimbursement and Spinal Decompression Therapy. I thought it would be easy…just use the “TRACTION” code…right?

Hold on a second, I have a question for you…if a Medicare patient receives Spinal Decompression Therapy in your office and you’re a non-participating provider with Medicare, what CPT code are you required to use? Hint…you better NOT use mechanical traction (especially if you’re a DC-PT or MD-DC office).

I think Spinal Decompression Therapy is one of the best procedures a healthcare provider can use to help patients with herniated discs, sciatica, spinal stenosis and degenerated discs. I have been personally received many Spinal Decompression Therapy treatments (on many different tables) and have gotten great results.

Here’s another question…if a Blue Cross/Blue Shield patient receives Spinal Decompression Therapy in your office and you are “In-Network” with BC/BS, what CPT code will you use? Hint…you should not bill BC/BS a CPT code.

I feel that Spinal Decompression Therapy should be a “non-insurance” based service. Wait a second…did the “insurance-guru” just say that Spinal Decompression Therapy should be a “Cash-Based” service? YES!

But wait, here’s where it gets complicated.

You will be collecting money directly from patients and many of these patients (actually, most patients) have insurance. They’ll pay you for your Spinal Decompression Therapy services and then they’ll probably ask you for a claim to submit to their insurance carrier so they can recoup some of the money they’ve paid you.

NOW WHAT? - Do you know what to do?

You can’t blame a patient for asking you to give them a properly completed CMS-1500 claim form or statement so they can submit it to their insurance company. All they want to do is try and recoup the money they’ve paid you. Wouldn’t you do the same?

See next page
You must know how to choose the **most compliant** CPT and HCPCS codes (even though you might not get paid) and you must also know how to choose the most **appropriate** way to collect money directly from patients without worries.

You don’t want to have to worry about giving money back to patients or insurance companies. If an insurance carrier feels that you have incorrectly billed their insured, they can reimburse the patient and then recover the reimbursement from you as an **overpayment**. This is actually happening already!

Here’s another **PROBLEM**… many DCs, MDs and DOs are billing and coding **inappropriately** (usually they don’t even know it) and now some are being accused of abuse and fraud.

Did you know that two DCs were recently accused of cheating BC/BS out of approximately $2 million for false billing of Vertebral Axial Decompression? These DCs sought and received reimbursement by “misleading” BC/BS into believing they were performing other services that were covered. These DCs also instructed their employees **not** to call the procedure Vertebral Axial Decompression. This case is still being investigated.

You should know how to choose a compliant CPT code, (or HCPCS code), an appropriate ICD-9 code and in certain cases, know what type of **Advanced Notice of Payment** forms a patient should sign, plus you must have good documentation to justify the services being rendered.

**Next question**…if you are **In-Network** with a particular insurance plan, are you **required** to submit the claim to the insurance carrier for the Spinal Decompression Therapy services even if it may not be covered?

These and many other important questions are answered in **“Strategies on How to Bill & Code for Spinal Decompression Therapy.”** There are actually **NINE** billing and coding **CATEGORIES** specific to Spinal Decompression Therapy. Don’t gamble with your license. Learn all nine categories because you don’t want to **just assume** you’re doing it right.

Here’s my opinion…I’d rather bill insurance using the **right code**, get denied and then be able to **confidently** ask the patient to pay me, **THAN** bill the wrong code, GET PAID, and then be worried I’ll have to give the money back. **If you do not use the most appropriate approach to collecting money directly from patients, you may be required to refund patients** the money they’ve paid you – **DON’T LET THIS HAPPEN**.

Spinal Decompression Therapy involves more than just having a patient positioned on the table. Purchase **“Strategies on How to Bill & Code For Spinal Decompression Therapy”** and learn how to bill and code for **all the service procedures** related to Decompression Therapy such as reviewing MRIs, counseling and coordinating care for patients with herniated discs, prolonged visits, HCPCS codes, proper modifier use, ADLs, plus much more!

See next page
Also, how to DOCUMENT MEDICAL NECESSITY for rehab services and the CPT codes to AVOID! We’ll also include a BONUS SECTION on How to Bill and Code for Low Level Laser Therapy.

My name is Dr. Marty Kotlar and I’m the President of Target Coding. I am Certified in Healthcare Compliance, Certified in CPT Coding and widely regarded as the industry leader in compliant CPT coding and billing. I am a contributing author to Chiropractic Economics, Dynamic Chiropractic and have written two best-selling guidebooks on insurance reimbursement. I am a featured speaker at the Parker seminars and for the Foot Levelers Speakers Bureau. I am a member of the ACA, ICA, American Academy of Professional Coders, American Medical Billing Association and The Council on Chiropractic Physiological Therapeutics & Rehabilitation.

“Strategies on How to Bill & Code for Spinal Decompression Therapy” is great for DCs, DC-PT and MD-DC offices that already own a Decompression Table or are thinking about getting one. Why would you buy a piece of equipment for $100K and not know how to get paid for it?

“Strategies on How to Bill & Code for Spinal Decompression Therapy” comes with a 4 CD SET & INSTRUCTION MANUAL. See Order Form on next page.

This product also comes with the opportunity to call us after you have listened to the presentation and ask us up to three (3) follow-up questions/inquiries.

Feel free to contact us at 1-800-270-7044 if you have any questions. Thank you.

Sincerely,

Dr. Marty Kotlar

Marty Kotlar, DC, CHCC, CBCS
President, Target Coding
Strategies on How to Bill & Code for Spinal Decompression Therapy

Learn how to bill and code for all the service procedures related to Decompression Therapy such as reviewing MRIs, counseling and coordinating care for patients with herniated discs, prolonged visits, HCPCS codes, proper modifier use, ADLs, plus much more! Also, how to DOCUMENT MEDICAL NECESSITY for rehab services and the CPT codes to AVOID! We’ll also include a BONUS SECTION on How to Bill and Code for Low Level Laser Therapy. Strategies on How to Bill & Code for Spinal Decompression Therapy comes with a 4 CD set and Instruction Manual.

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