

CHIROPRACTIC

THE ADVERSE EFFECT OF THE PROPOSED WCB CHANGES TO THE CHIROPRACTIC FEE SCHEDULE 2018.

The WCB has made a number of changes to the chiropractic fee schedule 2018 that directly affect the injured workers of NYS by removing or greatly diminishing, billable services that aid in the care of injured workers and challenge the ability of chiropractors to remain solvent. There is a need for patients, chiropractors, medical doctors, politicians and concerned citizens to send comments to the WCB to resist these proposed changes. Such emails should be done prior to November 1, 2018 and sent to: regulations@wcb.ny.gov

1. **FUNCTIONAL TESTING:** The code **97750** governing range of motion testing has been removed from the fee schedule. CPT codes **95851** and **76499** have not been removed but are not part of the Chiropractic Fee Schedule. CPT code **96002** has been removed, as surface EMG is not recommended under the MTG.
 - a. Correction: Restore code 97750; provide code 96002; make codes **95851** and **76499** part of the Chiropractic fee schedule. Code **97750** is necessary for objective measures of physical performance to evaluate objective findings relative to an injury over time so as properly address reporting to the WCB. Code **96002** applies to dynamic surface EMG not static surface EMG and where such is endorsed/referenced in the Practical Guide of Range of Motion Assessment an American Medical Association publication by John Gerhardt, Linda Cocchiarella and Randall Lea, 2001 and revision 2009. Dynamic Surface EMG is well established in the literature as it would apply to flexion/relaxation studies and the documentation of spasm.
 - b. **CPT code 76499 has not been removed**, “rather they are simply not part of the chiropractic fee schedule.” CPT code **76499** is used to bill for an unlisted diagnostic radiographic procedure. This code is used to further evaluate imaging including X-ray digitization and subsequent mensuration so as to comment upon translation and functional angulation of vertebral motor units with regard to instability or loss of function.

PROPOSED CORRECTION: Please restore code 97750 to the chiropractic fee schedule. Please add CPT codes 76499, 95851 and 96002 to the chiropractic fee schedule.

2. **EMG TESTING:** There is up to a 63% diminishment for standard CPT codes for EMG testing.

PROPOSED CORRECTION: Return EMG reimbursement to 2017 values.

3. **GROUND RULE 10:** This indicates that chiropractors must bill using the Chiropractic Fee Schedule only.

PROPOSED CORRECTION: Eliminate Ground Rule 10 so that codes that are necessary for chiropractic practice not itemized in the chiropractic fee schedule can be utilized.

4. **TIME LIMITS:** On page 20 of the proposed 2018 chiropractic physical medicine section post-10/03/2018 there is reference to care/procedure/modalities to be performed within **180 days** of the accident or illness date. This eliminates care for the injured worker. Such action also oversteps legislative authority regarding the NY State No-Fault system by applying regulations through the fee schedule of the WCB system.

PROPOSED CORRECTION: Remove the time restriction on page 20 of the proposed 2018 chiropractic physical medicine section post-10/03/2018.

5. **MANIPULATION UNDER ANESTHESIA:** This service has been eliminated in the chiropractic fee schedule with resultant loss of service to the injured worker.

PROPOSED CORRECTION: Restore coverage for MUA.