



Coding Policy

CMT and E&M Reimbursement Solutions

The American Chiropractic Association (ACA) fields numerous inquiries regarding the use of Chiropractic Manipulative Treatment (CMT) codes with evaluation and management (E&M) services. The following statement reflects ACA's position on the use of CMT codes and evaluation and management (E/M) services.

It is outlined in the AMA's Common Procedural Terminology (CPT) Book that there are instances in which it is appropriate to bill a CMT and an E/M code together on the same date of service. It is clearly stated that:

"The physician work component of the CMT codes includes a brief pre-manipulation patient assessment. Additional evaluation and management services may be reported separately using the modifier -25 if, and only if, the patient's condition requires a significant separately identifiable E/M service, above and beyond the usual pre-service and post-service work associated with the procedure.

The E/M service may be prompted by the symptom or condition for which the procedure and/or service was provided. (On any given visit, if the patient presents more than one specific area of complaint that necessitates separate and distinct clinical evaluations, evaluation/management service codes (E/M) should be the service that most accurately reflects the cumulative level of all services provided during the visit.) As such different diagnoses are not required for the reporting of the E/M service on the same day."

Some examples of when it is appropriate to bill a separate E/M code on the same day as a CMT code include a new patient visit, an established patient with a new condition, new injury, re-injury, aggravation, exacerbation, or a re-evaluation to determine if a change in treatment plan is necessary. Use of Evaluation and Management services should be supported by appropriate documentation. The ACA recommends use of the E/M documentation requirements that were developed by the AMA and CMS for use by all physicians.

When CMT and E/M codes are billed together, it is necessary to attach a -25 modifier to the E/M code (example: 99212-25). The -25 modifier signals the payer that an additional service was performed, above and beyond the usual pre- and post- service work associated with the CMT code.