

10A NCAC 25P .0403 CHIROPRACTIC SERVICES

- (a) No reimbursement from North Carolina Medicaid shall be made for x-rays or other diagnostic or therapeutic services provided by a chiropractor except as provided in this Rule.
- (b) Medicaid coverage of chiropractic services is limited to manual manipulation of the spine to correct a subluxation.
- (c) Subluxation shall be confirmed by physical examination or by one set of x-rays taken within six months of the initial date of service.
- (d) The treatment plan shall document:
 - (1) the symptoms or diagnosis treated;
 - (2) diagnostic procedures and treatment modalities used;
 - (3) results of diagnostic procedures and treatments; and
 - (4) anticipated length of treatments.
- (e) Medical documentation shall support continued treatment.
- (f) Chiropractic providers shall meet the educational requirements as outlined in 42 CFR 410.21(a).

*History Note: Authority G.S. 108A-25(b); 108A-54; 42 C.F.R. 440.60;
Eff. February 1, 1976;
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