

MEDICARE DEMONSTRATION PROJECT EXPANDS COVERAGE FOR CHIROPRACTIC SERVICES

The Centers for Medicare and Medicaid Services (CMS) is conducting a two-year demonstration project that expands coverage for chiropractic services for Medicare beneficiaries. If you are a Medicare beneficiary who previously received such services from a chiropractor, you would have had to pay out of pocket. You will now be able to receive certain services from a chiropractor subject to the regular Medicare coinsurance and deductibles.

- **Where will the project take place in my state?** The following counties are included: Boone, Bureau, Carroll, Cook, DeKalb, DuPage, Grundy, Henry, JoDaviess, Kane, Kankakee, Kendall, Lake, LaSalle, Lee, Marshall, McHenry, Mercer, Ogle, Putnam, Rock Island, Stark, Stephenson, Whiteside, Will, and Winnebago.
- **What *new services* can I receive from a chiropractor under Medicare?** Medicare currently helps pay for manual manipulation of the spine to correct a subluxation by chiropractors. But Medicare will now cover additional medical, diagnostic, and therapy services that chiropractors are legally allowed to provide. These include: physical therapy, x-rays, lab tests, and extraspinal manipulation, which is a manipulation of a body part other than the spine. Chiropractors will also be able to order magnetic resonance imaging (MRIs) and CT scans, and refer patients to physical therapists for therapy services if they do not provide therapy services.
- **How long is the project?** The project starts April 1, 2005 and ends March 31, 2007. Medicare will not pay chiropractors for these expanded services after March 31, 2007.
- **Is *my chiropractor participating in the project*?** Confirm that your chiropractor is participating in the demonstration; if he or she is not participating, then your chiropractor may bill you for the full costs of these expanded services.
- **Am I *eligible to participate*?** To be eligible, you must have Medicare Part B insurance and your chiropractor must practice in the Illinois counties previously listed. You must be enrolled in original Medicare and not in a Medicare Advantage plan (risk or cost based).

Talk with your chiropractor to:

 - Review the complete list of eligible services under the demonstration.
 - Discuss what Medicare will cover.
- **What are the *costs*?** If you receive the newly covered Medicare services from a chiropractor, you will simply pay your customary unmet deductibles and applicable coinsurance.

 - If you have Medigap, the customary coinsurance and deductible usually covered for Medicare services should be covered.

- If you have employer coverage you will need to find out if they cover the coinsurance and/or deductible.
 - If you are in a Medicare Advantage risk plan, your plan will not cover the expanded services. You will be responsible for all costs.
 - If you are in a cost health plan, demonstration services will not be included services if they are provided by a plan network provider; however, if you go out of network, Medicare will pay for the demonstration services but you will have to pay any coinsurance and deductibles.
- **Questions?** If you have questions that cannot be answered by your chiropractor—
- Call: **1-800 MEDICARE**
 - or*
 - Send an e-mail to:
MMA_Section_651@cms.hhs.gov