

Chiropractic Billing Success Blueprint

Step-by-step actions to reduce
denials & speed payments



1. Verify Your Patient & Insurance Information

- ✓ Confirm patient demographics & insurance details before every visit
- ✓ Verify coverage and any deductible/copay obligations
- ✓ Collect necessary referrals and authorizations

2. Use Correct CPT Codes & Modifiers

- ✓ Review CPT codes for spinal manipulation, therapy, and other services
- ✓ Apply the correct modifiers (e.g., 25, 59) to avoid denials
- ✓ Stay updated on payer-specific coding rules

3. Document Medical Necessity

- ✓ Record patient diagnosis clearly and accurately
- ✓ Note clinical justification for all treatments provided
- ✓ Maintain detailed session notes with patient progress

4. Submit Clean Claims

- ✓ Double-check all patient, provider, and service information
- ✓ Attach required documentation (notes, X-rays, referrals)
- ✓ Ensure claim formats match payer requirements

5. Track Claims & Follow-Up

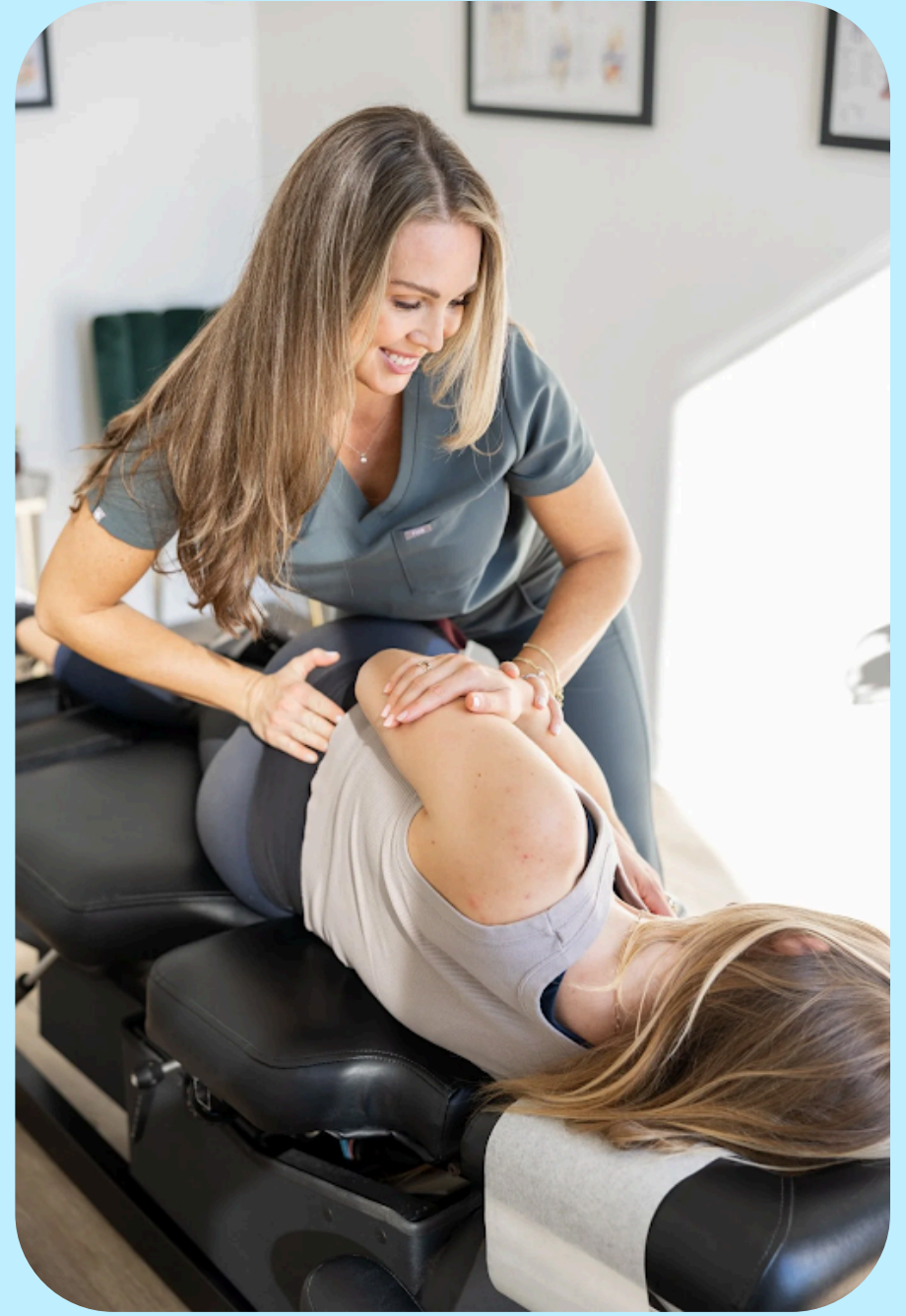
- ✓ Monitor claim submission status regularly
- ✓ Identify and address rejected or denied claims immediately
- ✓ Keep a log of follow-ups and resolution outcomes

6. Handle Denials Effectively

- ✓ Review denial reason codes carefully
- ✓ Submit appeals promptly with supporting documentation
- ✓ Track appeal results and update internal processes

7. Optimize Revenue Cycle

- ✓ Analyze denial trends and recurring errors
- ✓ Train staff on common billing pitfalls
- ✓ Consider outsourcing complex claims to billing experts



Bonus Tips

- Keep a "pre-authorization checklist" for services requiring prior approval
- Use billing software reminders to prevent missed submissions
- Regularly update your CPT & payer rules knowledge

! Need Help ?

Stop losing revenue to denied claims!

Contact **Rapid ClaimCare** for a free
chiropractic billing consultation.

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