

GHI/Emblem Non-City of New York & Medicare and HIP/Emblem Chiropractic Code List

Category	CPT® Code	CPT® Code Description	Prior Auth	Claims Studio	Risk/Non-Risk
CHIRO	99202	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT WHICH REQUIRES THESE THREE KEY COMPONENTS: AN EXPANDED PROBLEM FOCUSED HISTORY; AN EXPANDED PROBLEM FOCUSED EXAMINA	Yes	Yes	N
CHIRO	99203	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT WHICH REQUIRES THESE THREE KEY COMPONENTS: A DETAILED HISTORY; A DETAILED EXAMINATION; AND MEDICAL DECISION MAKING	Yes	Yes	N
CHIRO	99204	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT WHICH REQUIRES THESE THREE KEY COMPONENTS: A COMPREHENSIVE HISTORY; A COMPREHENSIVE EXAMINATION; AND MEDICAL DECISI	Yes	Yes	N
CHIRO	99205	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT WHICH REQUIRES THESE THREE KEY COMPONENTS: A COMPREHENSIVE HISTORY; A COMPREHENSIVE EXAMINATION; AND MEDICAL DECISI	Yes	Yes	N
CHIRO	99211	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT THAT MAY NOT REQUIRE THE PRESENCE OF A PHYSICIAN. USUALLY THE PRESENTING PROBLEM(S) ARE MINIMAL. TYPICALL	Yes	Yes	N
CHIRO	99212	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY COMPONENTS: A PROBLEM FOCUSED HISTORY; A PROBLEM FOCUSED EX	Yes	Yes	N
CHIRO	99213	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY COMPONENTS: AN EXPANDED PROBLEM FOCUSED HISTORY; AN EXPANDE	Yes	Yes	N
CHIRO	99214	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY COMPONENTS: A DETAILED HISTORY; A DETAILED EXAMINATION; MED	Yes	Yes	N
CHIRO	99215	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY COMPONENTS: A COMPREHENSIVE HISTORY; A COMPREHENSIVE EXAMIN	Yes	Yes	N
CHIRO	98940	CHIROPRACTIC MANIPULATIVE TREATMENT (CMT); SPINAL ONE TO TWO REGIONS	Yes	Yes	N
CHIRO	98941	CHIROPRACTIC MANIPULATIVE TREATMENT (CMT); SPINAL THREE TO FOUR REGIONS	Yes	Yes	N
CHIRO	98942	CHIROPRACTIC MANIPULATIVE TREATMENT (CMT); SPINAL FIVE REGIONS	Yes	Yes	N