

Webinar Title: Implementing Medicare In The Compliant “Cash” Practice

Duration: 3 Hours

Webinar Objective:

We will explore the issue of whether Doctor of Chiropractic can legally treat Medicare patients and avoid an obligation to submit claims for those services on behalf of a Medicare beneficiary. While Doctor of Chiropractic cannot legally “opt out” of Medicare, they can certainly accomplish the same result from a practical perspective. As the following analysis demonstrates, it is certainly possible to treat a Medicare patient and avoid any statutory obligation to submit a claim to Medicare on the patient’s behalf. There are, however, very specific rules that a Doctor of Chiropractic must be knowledgeable of and comply with to accomplish this objective compliantly.

Webinar Outline:

Hour 1

- Statutory Obligations for Claims Submission Under Medicare
- Understanding the concept of Coverage
- Impact of a statutory exclusion vs. non-coverage due to medical necessity.
- Medicare coverage for services of licensed doctors of chiropractic.
- Understanding the concept of medical necessity – statutory and practical analysis

Hour 2

- Understanding coverage under commercial insurance plans
- Understanding billing obligations for patients insured under commercial insurance plans including Medicare Advantage, FEHBA and Medicaid HMO beneficiaries.
- Understanding the impact of participation.
- Medical necessity as applied in the commercial payer context
- Defining commonly performed but non-covered care types.
- Differentiating types of “cash” practices and associated risks
- Coding and pricing of non-covered “cash” services
- Implications for personal injury/workers compensation cases.

Hour 3

- Step by Step implementation
- Detailed review of exemplary forms and usage
- Questions

Assessment & Evaluation:

- **Knowledge Check Quiz:** Questions to assess understanding of Implementing the compliant “cash” practice