

The Michigan Workers’ Compensation Agency has released the 2018 maximum allowable payment (MAP) fee schedule. These fees are effective January 8, 2019. This list of CPT codes describes some of the services most commonly performed by chiropractic physicians. For a complete description and appropriate usage, please consult a CPT manual.

List of Commonly Used Chiropractic CPT Codes

Evaluation and Management

CPT® CODE	DESCRIPTION	Maximum Allowable Payment Conversion Factor = \$47.66
99201	Office/outpatient visit, new	\$59.70
99202	Office/outpatient visit, new	\$100.59
99203	Office/outpatient visit, new	\$145.63
99204	Office/outpatient visit, new	\$222.32
99211	Office/outpatient visit, est	\$28.49
99212	Office/outpatient visit, est	\$58.56
99213	Office/outpatient visit, est	\$97.69
99214	Office/outpatient visit, est	\$144.22
99215	Office/outpatient visit, est	\$195.00

Radiology

CPT® CODE	DESCRIPTION	Maximum Allowable Payment Conversion Factor = \$47.19
72020	Radiologic Examination, Spine, Single View, Specify Level	\$29.57
72040	Radiologic Examination, Spine, Cervical, 2 or 3 Views	\$43.90
72050	Radiologic Examination, Spine, Cervical, 4 or 5 Views	\$59.86
72052	Radiologic Examination, Spine, Cervical, 6 or More 3 Views	\$73.69
72070	Radiologic Examination, Spine, Thoracic, 2 Views	\$44.82
72072	Radiologic Examination, Spine, Thoracic, 3 Views	\$45.73
72074	Radiologic Examination, Spine, Thoracic, Minimum 4 views	\$51.23
72080	Radiologic Examination, Spine, Thoracolumbar, 2 views	\$44.36
72082	Radiologic Examination, Spine, Entire Thoracic and Lumbar, Including Skull, Cervical and Sacral Spine if performed (e.g., Scoliosis Evaluation, 2 or 3 Views	\$81.85
72100	Radiologic Examination, Spine, Lumbosacral, 2 or 3 Views	\$46.19
72110	Radiologic Examination, Spine, Lumbosacral, Minimum 4 Views	\$64.44
72114	Radiologic Examination, Spine, Lumbosacral, Complete, Including Bending Views, Minimum of 6 Views	\$80.95
72120	Radiologic Examination, Spine, Lumbosacral, Bending Views Only, 2 or 3 Views	\$53.52

Modalities & Therapies

CPT® CODE	DESCRIPTION	Maximum Allowable Payment Conversion Factor = \$47.19
97010	Hot or Cold Packs	\$8.57
97012	Traction, Mechanical, 1 or More Areas	\$19.92
97014	Electrical Stimulation, Unattended, 1 or More Areas	\$20.71
97016	Vasopneumatic Devices, 1 or More Areas	\$21.17
97018	Parrafin Bath, 1 or More Areas	\$11.78
97022	Whirlpool, 1 or More Areas	\$25.27
97024	Diathermy (Eg Microwave), 1 or More Areas	\$9.49
97026	Infrared, 1 or More Areas	\$8.57
97028	Ultraviolet, 1 or More Areas	\$10.90
97032	Electrical Stimulation (Manual), Each 15 Minutes, 1 or More Areas	\$20.84
97033	Iontophoresis, Each 15 Minutes, 1 or More Areas	\$27.72
97034	Contrast Bath, Each 15 Minutes, 1 or More Areas	\$20.30
97035	Ultrasound, Each 15 Minutes, 1 or More Areas	\$18.02
97036	Hubbard Tank, Each 15 Minutes, 1 or More Areas	\$47.00
97110	Therapeutic Exercises, 1 or More Areas, Each 15 Minutes	\$41.12
97112	Neuromuscular Reeducation, 1 or More Areas, Each 15 Minutes	\$46.71
97113	Aquatic Therapy with Therapeutic Exercises, 1 or More Areas, Each 15 Minutes	\$52.17
97116	Gait Training, 1 or More Areas, Each 15 Minutes	\$40.66
97124	Massage Therapy, 1 or More Areas, Each 15 Minutes	\$40.72
97140	Manual Therapy, 1 or More Areas, Each 15 Minutes	\$37.20
97150	Therapeutic Procedure(s), Group, 2 or More Individuals	\$24.57
97530	Therapeutic Activities, Direct (One-on-One) Contact, Each 15 Minutes	\$53.93

CPT® CODE	DESCRIPTION	Maximum Allowable Payment Conversion Factor = \$47.19
98940	Chiropractic Manipulative Treatment, Spinal, 1 or 2 regions	\$38.39
98941	Chiropractic Manipulative Treatment, Spinal, 3 or 4 regions	\$54.89
98942	Chiropractic Manipulative Treatment, Spinal, 5 regions	\$71.60
98943	Chiropractic Manipulative Treatment, Extraspinal, 1 or More Regions (Non-Spine)	\$37.24

Under the Workers' Compensation system, a chiropractic physician can perform and bill for any reasonable service that is within their scope of practice. Doctors are to be reimbursed whichever is less, their usual and customary charge or the maximum allowable payment.

To view or download the full set of Workers' Compensation fee schedules and the 2018 Health Care Services Rules and Manual Effective March 15), go to the State of Michigan Workers' Compensation Agency website, www.michigan.gov/wca. Select "Health Care Services" from the left-hand menu, then "HCS Rules, Manuals & Fees" for complete fee schedules, rules and manuals.

NOTE: THE ABOVE LIST IS NOT MEANT TO BE ALL-INCLUSIVE. PLEASE SEE FULL FEE SCHEDULE FOR OTHER APPROPRIATE CPT CODES THAT MAY BE USED BY DOCTORS OF CHIROPRACTIC.