

Course Title: 2025 CPT Updates & the consequences for chiropractic practitioner

Instructor: Samuel Collins, DC

Location: Live Synchronous/online

Objective: This postgraduate course is specifically designed for chiropractors to effectively review and document the clinical implications of diagnosis coding and current procedural terminology for documentation of the patient record. The fundamental element of this course is to strengthen attendees' knowledge of clinical ICD-10, clinical CPT coding, and clinical documentation requirements for compliance and accuracy.

<p>Hour 1 <u>Billing & Coding</u></p>	<ul style="list-style-type: none">• 2025 CPT updates and revisions specific to chiropractic providers• CMT 98940-98943 requirements for each code from diagnosis to documentation• Evaluation and Management 99202-99215; understanding requirements time and medical decision making• Telemedicine, prolonged services, review of records, and how to document, code.• Physical Medicine & Rehabilitation 97010-97799. Complete code list with definitions and requirements for documentation• Protocols to set up and code an active care, evidenced-based care plan.• Learn the common mistakes that result in denials from missing modifiers, code combinations, and lack of documentation
<p>Hour 2 <u>ICD10 Diagnosis</u></p>	<ul style="list-style-type: none">• 2025 Updates for ICD10 and a 500+ common code list of the diagnosis• Diagnosis hierarchy and which codes represent short-term, moderate-term, and long-term clinical patient care• Diagnosis excludes clinical codes- Not all codes can be combined.
<p>Hour 3 <u>Relative Value Units</u></p>	<ul style="list-style-type: none">• 2025 Relative Value Units for all common chiropractic codes• Understand how carriers use RVU to establish fee allowances and how you should also use them to establish a fair and reasonable fee based on published protocols -
<p>Hour 4 <u>Physical Medicine Coding</u></p>	<ul style="list-style-type: none">• Chiropractic manipulation coding and documentation• Chiropractic scope of practice and physical medicine• Correct coding initiative (CCI) and CMT• Physical medicine coding and definition and documentation including specialty modifiers and timed service requirements
<p>Hour 5 <u>Medical Necessity</u></p>	<ul style="list-style-type: none">• Evidence-based care plans and the requirements of medical necessity• Use of validated disease-specific outcome assessment tools and functional change
<p>Hour 6 <u>Medicare coding Requirements</u></p>	<ul style="list-style-type: none">• Proper use of Medicare modifier AT, GA, GP, GY, & GZ• Chiropractic diagnosis reporting• Medicare Medical Necessity & 2025 protocol updates• Chiropractic documentation requirements for Medicare