



**ORTMAN**  
CHIROPRACTIC CLINIC

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# Medical Necessity:

This sheet is to detail some information for Medicare patients.

Medicare only pays for chiropractic treatments of the spine when they feel they are necessary. Proper documentation of a spinal subluxation is required. If Medicare feels the treatments are not necessary, the patient is responsible for the cost.

Two ways to gather needed information for documentation are by doing an x-ray or routine examination. These are not paid for by Medicare and most likely not paid for by your supplement insurance. The cost is as low as \$23.00. The routine exam will be done every 6 months, if there is a new complaint or new injury, or if you have not been here for 1 month.

Some of the services Medicare will not pay for are:

- Examinations
- Traction
- Ultrasound
- Microcurrent
- Diathermy
- Autothermy
- Laboratory and supplies
- X-ray
- Vitamins
- Orthopedic supplies

Either an examination or an x-ray will be required by the clinic doctors.

Medicare will likely pay for spinal manipulations as long as your deductible has been met and there is enough documentation to show a problem with the spine.

Thank you,

Please sign after reading:

\_\_\_\_\_

Patient Signature

\_\_\_\_\_

Date