

Functional Outcome Assessment in Chiropractic Care

Coding Specifications

Codes required to document a visit for chiropractic manipulative treatment occurred:

A CPT service code is required to identify patients to be included in this measure.

All measure-specific coding should be reported ON THE SAME CLAIM.

CPT service codes

- 98940, 98941, 98942 (chiropractic manipulative treatment)

Quality codes for this measure:

G-code descriptors

(Data collection sheet should be used to determine appropriate code.)

- **G8539:** Documentation of a current functional outcome assessment using a standardized tool AND care plan based on identified deficiencies
- **G8540:** Documentation that the patient is not eligible for a functional outcome assessment using a standardized tool
- **G8542:** Documentation of a current functional outcome assessment using a standardized tool; no documentation of a care plan, patient not eligible
- **G8541:** No documentation of a current functional outcome assessment using a standardized tool, reason not specified
- **G8543:** Documentation of a current functional outcome assessment using a standardized tool; no documentation of a care plan, reason not specified