

## **Indiana Medicaid Resolutions Manual**

**NAME:** 6103 COMPONENT SPINAL X-RAYS VS FULL SPINE X-RAY

**ERROR TYPE:** Contra Audit

**HEADER/DETAIL:** Detail

**OVERRIDABLE:** N

**ALLOW DENIAL:** Y

### **DESCRIPTION:**

This contra-indicated audit will set when a chiropractor (specialty 150) bills for a component spinal x-ray and a full spine x-ray has been paid for the same member within the same calendar year.

### **CRITERIA:**

When component spinal series x-rays (see procedure codes within the audit rules) are billed by a chiropractor (specialty 150) and a payment has been made to any chiropractor for a full series spinal x-ray (see procedure codes within the audit rules) within the same calendar year as the date of service on the claim, set this audit with EOB 6103.

### **DISPOSITION:**

Note: EOB 9999 with a Do Not Post status is for internal system use only. This EOB is used to avoid potential system processing abends. This EOB is not posted on the RA and the disposition may be ignored.

**Claim Type:** 0 - All Claim Types **Member Plan:** ALL **Status:** Do Not Post

Location	Region	EOB	Disposition
00	00	9999	PAY

**Claim Type:** M - Professional Claims

**Member Plan:** ALL **Status:** Post

Location	Region	EOB	Disposition
21	00	6103	DENY
21	30	6103	PAY
21	32	6103	PAY

## **Indiana Medicaid Resolutions Manual**

21	33	6103	PAY
21	34	6103	PAY
21	52	6103	PAY
21	55	6103	PAY
21	64	6103	PAY
21	70	6103	PAY
21	72	6103	PAY
21	73	6103	PAY
21	74	6103	PAY

**EOB: 6103** - COMPONENT SPINE X-RAYS ARE NOT REIMBURSABLE FOR CHIROPRACTORS WHEN A FULL SERIES SPINAL X-RAY HAS BEEN PAID TO A CHIROPRACTOR FOR THE SAME RECIPIENT WITHIN THE SAME CALENDAR YEAR.

<b>ARC Code</b>	<b>ARC Description</b>	<b>Effective Date</b>	<b>End Date</b>
97	The benefit for this service is included in the payment/allowance for another service/procedure that has already been adjudicated. Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	19950101	22991231

<b>Remark Code</b>	<b>Remark Description</b>	<b>Effective Date</b>	<b>End Date</b>
N20	Service not payable with other service rendered on the same date.	20000101	22991231

**EOB: 9999** - PROCESSED PER POLICY.

## **Indiana Medicaid Resolutions Manual**

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### **METHOD OF CORRECTION:**

Claims setting this audit will systematically deny when component spinal series x-rays are billed by a chiropractor and full spine X-ray has been paid for the same calendar year.

