ATTACHMENT 3.1-A Item 6c Applies to both Categorically and Medically Needv

## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Nebraska

LIMITATIONS - CHIROPRACTIC SERVICES

Nebraska Medicaid limits coverage of chiropractic services to:

- 1. Certain spinal x-rays;
- 2. Manual manipulation of the spine;
- 3. Certain evaluation and management services;
- 4. Traction:
- 5. Electrical stimulation;
- 6. Ultrasound: and
- 7. Certain therapeutic procedures, activities, and techniques designed and implemented to improve, develop, or maintain the function of the area treated.

The following guidelines outline the maximum number of treatments Medicaid may consider for payment:

- 1. For clients age 21 and older, chiropractic treatment is limited to those treatments deemed medically necessary;
- 2. For clients age 20 and younger, chiropractic treatment is limited to those treatments deemed medically necessary; and
- 3. No more than one treatment per client per day is covered.

Coverage of spinal x-rays is limited to one set of spinal x-rays for a client in a twelve-month period.

TN No. <u>NE 20-0005</u>

Supersedes

TN No. MS-08-09