

**SENATE
STATE OF MINNESOTA
NINETY-SECOND SESSION**

S.F. No. 569

(SENATE AUTHORS: UTKE)

DATE
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OFFICIAL STATUS
Introduction and first reading
Referred to Health and Human Services Finance and Policy

1.1 A bill for an act
1.2 relating to human services; modifying coverage of chiropractic services under
1.3 medical assistance and MinnesotaCare; amending Minnesota Statutes 2020, section
1.4 256B.0625, subdivision 8e; repealing Minnesota Statutes 2020, section 256L.03,
1.5 subdivision 3b; Minnesota Rules, part 9505.0245.

1.6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.7 Section 1. Minnesota Statutes 2020, section 256B.0625, subdivision 8e, is amended to
1.8 read:

1.9 Subd. 8e. **Chiropractic services.** ~~Payment for~~ (a) Medical assistance covers chiropractic
1.10 services is and related services. Services under this paragraph are limited to one annual
1.11 evaluation and 24 visits per year unless prior authorization of a greater number of visits is
1.12 obtained.

1.13 (b) Subject to the limitations of paragraph (a), medical assistance covers spinal
1.14 manipulation, therapeutic exercise, and extraspinal manipulation, provided by an individual
1.15 licensed to practice under section 148.06. Covered therapies are limited to those related to
1.16 a chiropractic plan of care.

1.17 Sec. 2. **REPEALER.**

1.18 (a) Minnesota Rules, part 9505.0245, is repealed.

1.19 (b) Minnesota Statutes 2020, section 256L.03, subdivision 3b, is repealed.

256L.03 COVERED HEALTH SERVICES.

Subd. 3b. **Chiropractic services.** MinnesotaCare covers the following chiropractic services: medically necessary exams, manual manipulation of the spine, and x-rays.

9505.0245 CHIROPRACTIC SERVICES.

Subpart 1. **Definitions.** The following terms used in this part have the meanings given them.

A. "Chiropractic service" means a medically necessary health service provided by a chiropractor.

B. "Chiropractor" means a person licensed under Minnesota Statutes, sections 148.01 to 148.108.

Subp. 2. **Payment limitations.** Medical assistance payment for chiropractic service is limited to medically necessary manual manipulation of the spine for treatment of incomplete or partial dislocations and the x-rays that are needed to support a diagnosis of subluxation.

A. Payment for manual manipulations of the spine of a recipient is limited to six manipulations per month and 24 manipulations per year unless prior authorization of a greater number of manipulations is obtained.

B. Payment for x-rays is limited to radiological examinations of the full spine; the cervical, thoracic, lumbar, and lumbosacral areas of the spine; the pelvis; and the sacroiliac joints.

Subp. 3. **Excluded services.** The following chiropractic services are not eligible for payment under the medical assistance program:

A. laboratory service;

B. diathermy;

C. vitamins;

D. ultrasound treatment;

E. treatment for a neurogenic or congenital condition that is not related to a diagnosis of subluxation;

F. medical supplies or equipment supplied or prescribed by a chiropractor; and

G. x-rays not listed in subpart 2.