

# Sample Chiropractic Clinic

## CHIROPRACTIC ACTIVE TREATMENT PLAN

Patient Name: \_\_\_\_\_

Date of Tx Plan: \_\_\_\_\_ Onset Date (date patient presented to office): \_\_\_\_\_

*- The chiropractor should be afforded the opportunity to effect improvement or arrest or retard deterioration of subluxation within a reasonable and generally predictable period of time. Acute subluxation (e.g., strains or sprains) problems may require as many as 3 months of treatment but some require very little treatment. In the first several days treatment may be quite frequent but decreasing in frequency with time or as improvement is obtained.*

*- Chronic spinal joint condition (e.g., loss of joint mobility or other joint problems) implies, of joints have already "set" and fibrotic tissue has developed. This condition may require a longer treatment time, but not with higher frequency.*

*- The mere statement or diagnosis of "pain" is not sufficient to support medical necessity for the treatments. The location of pain must be described and whether the particular vertebra listed is capable of producing pain in the area determined.*

The problem/complaint addressed and precise level of each subluxation treated must be specified in the medical record. The need for an extensive, prolonged course of treatment should be consistent with the reported diagnosis and must be clearly documented in the medical record.

*Recommended level of care (duration and frequency of visits);*

Duration: \_\_\_\_\_ visits for this care plan

Frequency of visits: \_\_\_\_\_ times a week for \_\_\_\_\_ weeks

\_\_\_\_\_ times a week for \_\_\_\_\_ weeks

*-Specific treatment goals:*

*-Objective measures to evaluate treatment effectiveness:*

Signature of Physician:

Date:

\_\_\_\_\_

\_\_\_\_\_

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## Estimating Treatment Costs

Our Average Visit: \$ \_\_\_\_\_

(This is calculated based on the average reimbursed visit in our office taking into account all services, first and second visit, contract rates, etc. It is an ESTIMATE and can be adjusted up or down).

Treatment recommended by doctor: # \_\_\_\_\_ visits

Estimated Cost of Care:

\$ \_\_\_\_\_ X #visits \_\_\_\_\_ = Cost \$ \_\_\_\_\_

## Estimating Patient Portions

### **Cash Account:**

Patient Owes the estimated cost above less arranged discounts

### **CoPay Insurance:**

The Patient Owes the CoPay amount times the recommended visits

### **Deductible/Co-insurance:**

The Patient Owes the deductible and the co-insurance on the balance

**Example:** Cigna \$500 deductible, 80/20 plan  
48 visits at \$50 = \$2,400 estimated treatment cost  
\$2,400 - \$500 deductible = \$1,900  
\$1,900 times 20% co-insurance = \$380

Patient Owes \$500 deductible plus \$380 co-insurance = \$880 patient out of pocket

Patient Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Insurance Coordinator/Staff Initials: \_\_\_\_\_

\*Financial Hardships will be handled differently, and as a last resort option  
*Anything under \$ \_\_\_\_\_ per visit needs to be approved by Dr. \_\_\_\_\_*

(Financial Plans are liberal. Collection policies are not.)