INSURANCE COVERAGE FOR CUSTOM FOOT ORTHOTICS

Insurance coverage for Custom foot orthotics will vary by insurance company and individual policy. Always check if foot orthotics are a covered benefit under the patient’s insurance policy (insurance Verification for Custom Foot Orthotics *L3000 or L3030). Often, after a lengthy verification process, you will find out they are not covered and will be a cash item. If your patients are out of network, requiring them to pay cash and providing them with a letter of medical necessity and HCFA to file is a great idea. Other options include the use of flexible spending accounts and Health Savings Accounts. If the patient is paying you cash, advise them of the services included in their orthotic purchase (follow up visits, fitting, training, adjusting etc). Typical custom orthotic charges range from $400-600.

CPT CODE #97760 - Exam, Casting, Designing, Educating


HCPCS CODE L3030 - Foot, insert, removable, formed to patient foot, each (MODIFIER - bill left and right foot separately ie: L3030RT, L3030LT)

CPT CODE #97762 - Check-in - Dispensing and Fitting
Coverage of these codes (versus a low-level E/M service, or no coverage at all) will be dependant on the patient’s health plan benefit language and guidelines. Obviously, if custom foot orthotics are not covered items under a plan, these codes would not be valid for assessing those non-covered orthoses. Medicare will not cover custom foot orthotics.

INSURANCE VERIFICATION L3000 AND L3030

Are custom-molded foot inserts (orthotics) covered and billed as code L3000 or L3030? If the L3000 code is not accepted, can the code L3030 be used?
Do you cover Orthotics Management and Training, code 97760?
Do you cover Orthotics Check Out, code 97762?
Are there guidelines or limits on the use of the codes?
Are there condition-related limitations or reimbursement-related limitations?
Are the orthotics or other DMEs part of a separate policy benefit?
Is a Letter of Medical Necessity needed with the claim?
Is a prescription from a physician required? If yes, can the prescription be from a Doctor of Chiropractic?
Are custom-made orthotics subject to a separate co-pay or co-insurance?
Are these products subject to the deductible?
Is there a maximal limit of payout per diagnosis? Per year?
What is the percentage of coverage allowed?

Are there certain diagnosis codes necessary for reimbursement under the policy? If yes, what are they or where can I find them? If your patient’s diagnosis does not match the covered diagnoses the orthotics will be a cash product.

**DIAGNOSIS CODES**

* 355.5 Tarsal tunnel syndrome
*355.6 Morton’s metatarsalgia
* 355.6 Morton’s Neuma
355.6 Morton’s Toe
355.6 Lesion to plantar nerve
715.07 Osteoarthritis, generalized, ankle and foot
715.17 Osteoarthritis, localized, primary, ankle and foot
718.46 Contracture of the knee joint
718.47 Contracture of ankle and foot joint
719.06 Swelling of the knee joint
719.07 Swelling ankle and foot joint
719.46 Knee pain
719.47 Foot/Ankle Pain
719.56 Stiffness of knee joint, not elsewhere classified
719.57 Stiffness of joint, ankle and foot, not elsewhere classified
719.7 Difficulty in walking
*726.70 Metatarsalgia
*726.71 Achilles bursitis or tendinitis
*726.72 Tiabialis Tendonitis
*726.73 Calcaneal spur
*728.71 Plantar Fascial fibromatosis
*728.71 Plantar Fascitis
729.5 Pain in limb
735.0 Hallux valgus (acquired)
735.1 Hallux varus (acquired)
735.2 Hallux rigidus
735.3 Hallux malleus
735.5 Acquired claw toe
736.79 Foot Pronation

754.50 Talipes Varus
754.61 Congenital pes planus (congenital rocker bottom flat foot)
781.2 Abnormality of gait
781.92 Abnormality of posture
*844.9 Shin splints
845.02 Sprain and strain of calcaneofibular (ligament)
714.7 Rheumatoid Arthritis, Ankle/Foot
715.7 Osteoarthritis, Ankle/Foot
718.87 Joint Derangement, Ankle/Foot
726.70 Enthesopathy of Ankle
727.68 Rupture of Tendons, Foot/Ankle
726.72 Calcaneal Spur
727.1 Bunion
728.71 Plantar Fibrometosis
728.87 Other Disorders of the Ligaments and Fascia, Foot/Ankle
*733.94 Stress Fracture of Metatarsals
736.79 Acquired Deformity, Foot/Ankle
754.61 Congenital Pes Planus (Flat Feet)
755.61 Coxa Valga, Congenital
845.01 Sprain of Deltoid, (Ligament Ankle)
755.62 Coxa Vera, Congenital
845.02 Sprain of Calcaneofibular Ligament
845.03 Sprain of Tibiofibular Ligament
845.12.1 Sprain of Interphalangeal Joint/Toe