



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). Unfortunately, often times you may find that 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 good option. 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 L3000 – Foot, insert, removable, molded to patient model, 'UCB' type, Berkeley shell (MODIFIER - bill left and right foot separately ie: L3000RT, L3000LT). Best description of MojoFeet custom orthoses.

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.

Billing for MojoFeet Prefabs: Use code L3030 if you are heat molding the prefab to the patient's foot, and L3040 if you are not.

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, are there limits on what type of provider?
- 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?**

DIAGNOSIS CODES

G57.51 Tarsal tunnel syndrome
 M77.40 Morton's metatarsalgia
 G57.6 Morton's Neuroma
 M79.676 Morton's Toe
 G57.60 Lesion to plantar nerve
 M19.079 Osteoarthritis, generalized, ankle and foot
 *M19.279 Osteoarthritis, localized, primary, ankle and foot
 M24.569 Contracture of the knee joint
 M24.573 Contracture of ankle
 M24.576 Contracture of foot joint
 M25.461 Swelling/Effusion of the knee
 M25.473 Swelling/Effusion of the ankle
 M25.569 Knee pain
 M25.579 Foot/Ankle Pain
 M25.669 Stiffness of knee joint, not elsewhere classified
 M25.673 Stiffness of joint, ankle and foot not elsewhere classified
 R26.2 Difficulty in walking
 M77.4 Metatarsalgia
 M76.60 Achilles bursitis or tendonitis
 M76.829 Tibialis Posterior Tendonitis
 M77.30 Calcaneal spur
 M72.2 Plantar Fascial fibromatosis
 M72.2 Plantar Fasciitis
 M79.60 Pain in limb
 M20.10 Hallux valgus (acquired)
 M20.3 Hallux varus (acquired)
 M20.2 Hallux rigidus
 M20.2 Hallux malleus

M20.5X9 Acquired claw toe
 M21.6X1 Acquired ankle pronation
 M21.1 Talipes Varus
 M21.40 Pes planus (Flat foot) acquired
 R26 Abnormality of gait
 R29.3 Abnormality of posture
 T79.6XXA Shin splints (anterior)
 S93.41 Sprain and strain of calcaneofibular (ligament)
 M05 Rheumatoid Arthritis, Ankle/Foot
 M19 Osteoarthritis, Ankle/Foot
 M24.9 Joint Derangement, Ankle/Foot
 M77.9 Enthesopathy of Ankle
 M66.8 Rupture of Tendons, Foot/Ankle
 M77.3 Calcaneal Spur
 M21.61 Bunion
 M72.2 Plantar Fibromatosis
 M24.276 Other Disorders of the Ligaments and Fascia, Foot/Ankle
 M84.374 Stress Fracture of foot
 M21.90 Acquired Deformity, Foot/Ankle
 Q66.5 Congenital Pes Planus (Flat Feet)
 Q65.81 Coxa Valga, Congenital
 S93.42 Sprain of Deltoid, (Ligament Ankle)
 Q65.82 Coxa Vara, Congenital
 S93.41 Sprain of Calcaneofibular Ligament
 S93.43 Sprain of Tibiofibular Ligament
 S93.51 Sprain of Interphalangeal Joint/Toe