**How to be Medicare Compliant with Richie Brace® devices**

Introduction

When prescribing and dispensing pre-fabricated and custom Richie Brace® products, the practitioner has certain obligations in order to be compliant with recent Medicare requirements for reimbursement. This document will outline the basic highlights of what is required for documentation and record keeping. However, the practitioner can gain further information from the Durable Medical Equipment (DME) Medicare Administrative Contractor (MAC), known as the DME MAC website for their Jurisdiction regarding all rules and regulations for supplying durable medical equipment (DME) to Medicare beneficiaries. For all patients with other forms of health insurance, the following guidelines should also be followed as most third-party payors adhere to current Medicare policies.

In the past, we have provided a simple check-list of patient findings and documentation requirements for the practitioner to complete in order to fulfill the Medicare guidelines. Recent audits, however, have shown that a check-list is not sufficient if the patient medical record does not also document the same findings in narrative form. Therefore, the previous check-list is helpful and should be completed and enclosed in the medical record of the patient receiving any Richie Brace® product, but the practitioner is urged to also include a narrative section in the patient medical record on the day of prescription, casting and dispensal of any Richie Brace® product. This document will outline the essential elements of all documentation which will be required for the patient medical record.

For references and more detailed information, all prescribers and suppliers of Richie Brace® products are referred to:

The current DME MAC's for the 4 Medicare Jurisdictions and websites are:

**DME MAC A: https://med.noridianmedicare.com/web/jddme**
**DME MAC B: http://www.cgsmedicare.com/**
**DME MAC C: http://www.cgsmedicare.com/jc/**
**DME MAC D: https://med.noridianmedicare.com/web/jddme**

For a copy of a checklist of documentation for billing of AFO devices, please see:

https://www.noridianmedicare.com/dme/coverage/docs/checklists/ankle-foot_knee-ankle-foot_orthoses.html

For a review of the Local Coverage Determinations regarding AFO's, please see:

https://www.noridianmedicare.com/dme/coverage/archived_lcd.html

Prescribing Ankle-Foot Orthoses

Physicians, including podiatric physicians can prescribe ankle-foot orthoses (AFO's). Certified Orthotists and Certified Pedorthists must receive a written order, or a prescription from a physician in order to supply an AFO to a Medicare beneficiary. The prescribing physician must document the medical necessity for the AFO device in the patient medical record. The essential requirements for medical necessity of an AFO Device are:

Patient is ambulatory; **and**

Patient has a weakness or deformity of the foot and ankle; **and**

Patient requires stabilization of the foot and ankle for medical reasons; **and**

Patient has the potential to benefit functionally from the use of an AFO.

Recent audits of prescribers ( and suppliers) of AFO devices have shown that the patient medical record does not adequately document all four (4) elements of the medical necessity as shown above.

For the common pathologies which Richie Brace® products are prescribed, a sample progress/medical note is provided which may guide the practitioner in documenting the specific findings and indications for prescribing an ankle-foot orthosis. Please see: Sample Richie Brace Prescription Medical Record Documentation forms

Claims for Custom Fabricated Orthoses

When any of the custom fabricated Richie Brace devices are prescribed and dispensed, a very detailed documentation of the selection of a custom vs. pre-fabricated brace must be produced and kept on file. This requirement is vague and leads to many questions, but the fact is that the prescribing physician can make the determination that a custom fabricated device is indicated for this specific patient because: (only one criteria need be fulfilled)

i.e. Pick one or more:

Patient could not be fit with a prefabricated AFO; or

Condition necessitating the orthosis is expected to be permanent or of longstanding duration (more than 6 months); or

There is a need to control the knee, ankle or foot in more than one plane; or

Patient has a documented neurological, circulatory, or orthopedic status that requires custom fabricating over a model to prevent tissue injury; or

Patient has a healing fracture which lacks normal anatomical integrity or anthropometric proportions.

**Note: In almost all cases, custom Richie Brace® products are utilized to control the ankle and foot in more than one plane. In many cases, the condition is expected to be treated for a duration exceeding 6 months. We suggest you use at least 2 criteria in your medical documentation which should appear in narrative form in the patient medical record.**

Detailed Written Order

The physician supplier should not ordinarily be required to write an order (prescription) to his or herself for supplying an AFO device to their own patient. Until recently, Medicare only required that the physician keep on file a copy of the prescription, which is actually the order form to the authorized Richie Brace® distributor lab who provide the custom or pre-fab brace to the supplier/physician.

However, recent pre-payment audits have revealed some confusion on the part of the DME MAC when looking for required documentation of suppliers of AFO braces. Sometimes, the reviewer does not realize that the physician is also the supplier. Therefore, we recommend that all physicians dispensing Richie Brace® products complete a detailed written order which is kept in the patient medical record. This written order must include the following information:

Beneficiary's name

Physician's name

Date of the order and start date, if start date different than date of order

Detailed description of the item(s)

Physician signature and signature date

Dispensing an AFO

On the day of dispensal, the supplier must document a proof of delivery. This document must be signed and dated by the patient. This document can be kept in a separate folder, or can be inserted into the patient medical record. The elements of this document are:

Beneficiary's name

Delivery address

Sufficiently detailed description to identify the item(s) being delivered (e.g., brand name, serial number, narrative description)

Quantity delivered

Date delivered

Beneficiary (or designee) signature and date of signature

In addition to this document, the patient medical record should include a narrative description of the patient encounter which describes the fitting and providing of instructions for use by the patient. It should also verify that the patient signed and dated the proof of delivery slip and received the Abbreviated 30 MEDICARE DMEPOS Supplier Standards Document

The full version of the Supplier Standards may be found at 42 CFR 424.57c. An abbreviated version is attached.