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 Medicare requirements for reimbursement. This document will outline the basic highlights of what is required for documentation and record keeping. This is not an official Medicare document and is not a representation of the entire set of policies for dispensing durable medical equipment to Medicare beneficiaries. Therefore, the practitioner is urged to seek 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. (see below) 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.

References

Currently, the Richie Brace® website provides 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. The check-list can be used as an outline when entering specific information into the progress note or body of the medical record. 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:

Region A: http://www.medicarenhic.com/dme/index.shtml
Region B: http://www.ngsmedicare.com/ngs/portal/ngsmedicare/home
Region C: http://www.cgsmedicare.com/jc/
Region D: https://www.noridianmedicare.com/

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

https://med.noridianmedicare.com/documents/2230703/6750839/Documentation+Checklist+-+Ankle-Foot+Knee-Ankle-Foot+Orthoses

Prescribing Ankle-Foot Orthoses and Supplying Ankle-Foot Orthoses

Physicians, including podiatric physicians can be **prescribers** ankle-foot orthoses (AFO's). Many of these physicians also serve as **providers** of the AFO device. Other practitioners, such as Certified Orthotists and Certified Pedorthists **can only be providers**, i.e. 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. In a sense, by documenting that an AFO device is indicated for the specific patient, the prescribing physician has noted in the medical record that the device is being **prescribed.** This prescription must be justified based upon **medical necessity**. 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 often 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, sample progress/medical notes are provided which may guide the practitioner in documenting the specific findings and indications for prescribing an ankle-foot orthosis **(Please see: Sample Progress Notes for Common Pathologies used for Richie Brace® prescription)**

Claims for Custom Fabricated Orthoses

A recent requirement for all custom ankle-foot orthosis prescriptions is verification that a pre-fabricated device "could not be fit" to the specific patient. This used to be only an optional requirement for custom AFO prescription but now is an absolute necessity for documentation in the medical record. The record must specifically state that the patient "could not be fit with a pre-fabricated AFO"…the meaning of which is vague and confusing. We suggest that severe deformity will preclude the fitting of a pre-fabricated device, and the specifics of the deformity should be spelled out. Alternatively, the practitioner can try to fit a pre-fabricated Richie Brace® in the office and document that proper fit could not be achieved.

In addition, one more criteria for prescribing a custom AFO device must be documented in the medical record. The criteria should be selected from the following list, i.e pick one or more:

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 that at least 2 criteria be utilized and 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 himself or herself for supplying an AFO device to their own patient. As stated above, the physician should state in the medical record that an AFO brace is being prescribed on this date with the medical necessity of the prescription clearly spelled out in narrative form.

In addition to the narrative "prescription" of the AFO device contained in the medical record, Medicare requires that a copy of the vendor (Richie Brace® lab distributor) prescription form or purchase order be kept on file for each and every brace dispensed. The invoice provided by the lab distributor should also be kept on file. Both of these documents may be requested by Medicare in a pre-payment audit.

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. Despite adequate progress notes being submitted by the physician/supplier, a demand has been made for a "written order" which is ordinarily only required by suppliers such as orthotists or pedorthists.

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

(note: this can be written on an ordinary physician prescription form)

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: (see copy of "Richie Brace® Receipt on website)

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 of the 30 Medicare DMEPOS Supplier Standards can be found on the Richie Brace website, reimbursement page

Summary

Suppliers of durable medical equipment to Medicare beneficiaries must follow established guidelines for medical necessity and documentation of specific patient qualifications. The requirements for compliance with Medicare guidelines are clear and straightforward. This document is intended to summarize those requirements but cannot be interpreted as an official or legal Medicare publication. All suppliers of Richie Brace® products are urged to review the official rules and regulations required by Medicare for all DME providers which can be found on the websites of each of the four DME MAC's:

Region A: http://www.medicarenhic.com/dme/index.shtml

Region B: http://www.ngsmedicare.com/ngs/portal/ngsmedicare/home

Region C: http://www.cgsmedicare.com/jc/

Region D: https://www.noridianmedicare.com/