

Information that must be documented in the physician's notes for <u>Medicare</u> coverage of Custom AFO

- Patient is ambulatory and has a desire to ambulate
- Document that patient has weakness or deformity of the foot & ankle.
- Document that patient has the potential to benefit functionally with the AFO.
- Document that an "off the shelf" AFO was considered, note the reason(s) why off the shelf AFO will not work for the patient.
- Write an Rx for "custom AFO brace" and document this in the clinical notes.

(At least one of the following justifications for custom must be documented)

- 1. Patient will wear the brace longer than 6months or
- 2. Patient could not wear and an off the shelf (explain why)
- 3. There is a need to control the knee, ankle or foot in more than one plane, <u>or</u>
- Patient has a documented neurological, circulatory, or orthopedic status that requires custom fabrication to prevent tissue injury. (i.e. Diabetes, Charcot)