

DOCUMENTATION CHECKLIST FOR UPPER LIMB ORTHOSES

Documentation References: [Standard Documentation Requirements Policy Article \(A55426\)](#)

The supplier must be able to provide all of these items on request:

[Standard Written Order \(SWO\)](#)

[Beneficiary Authorization](#)

[Proof of Delivery \(POD\)](#)

[Continued Need](#)

[Continued Use](#)

Medical records from treating practitioner as noted below

[Educational Resources](#) - Located on left panel of Orthotic webpage

Medical records should contain:

Custom Fitted Orthoses

Medical records document medical necessity; **and**

The orthosis requires substantial modification for fitting at the time of delivery in order to provide an individualized fit.

Item must be trimmed, bent, molded (with or without heat), or otherwise modified resulting in alterations beyond minimal self-adjustment (meaning beyond the capability of the beneficiary or supplier to perform); **and**

This fitting at delivery requires expertise of a certified orthotist or an individual who has equivalent specialized training in the provision of orthotics to fit the item to the individual beneficiary.

Documentation must be sufficiently detailed to include, but is not limited to, a detailed description of the modifications necessary at the time of fitting the orthosis to the beneficiary.

Custom Fabricated Orthoses

Medical records document medical necessity; **and**

Documentation that beneficiary could not be fit with a prefabricated orthosis

Replacement of Complete Orthosis or Component of Orthosis

Replacement is required due to loss, a significant change in the beneficiary's condition, or irreparable accidental damage.

Beneficiary's medical record supports the device is still medically necessary.

Supplier's records document the reason for the replacement.

Narrative Required on Claim Line: Labor and Minor Parts HCPCS Codes

- **L4205** - Repair of orthotic device, labor component, per 15 minutes
 - Claim line for code L4205 narrative must include explanation of what is being repaired
- **L4210** - Repair of orthotic device, repair or replace minor parts (e.g., those without specific HCPCS codes). Supplier Price List (PL) amount is the amount the supplier is charging on the claim line.
 - Claim line for code L4210 narrative must include:
 - HCPCS code of item being repaired
 - Description of each item that is billed

Upper Limb Orthoses Coding

Correct coding is an essential element for correct claim payment. The DME MACs and [Pricing, Data Analysis and Coding \(PDAC\)](#) contractor maintain a variety of resources to assist suppliers in determining the appropriate code for billing upper extremity braces. Please refer to the joint article, [Correct Coding of Finger, Hand, Hand-Finger and Wrist-Hand- Finger Braces \(Orthoses\) - Revised](#) and [Correct Coding of Elbow, Shoulder, Shoulder-Elbow-Wrist-Hand and Shoulder- Elbow-Wrist-Hand-Finger Braces \(Orthoses\)](#) for additional information.