









- Orthotics
- Prosthetics
- Mobility

Knee Orthoses (AFOs)

Prescription	Device	Indications	Documentation
CUSTOM Hip Knee Ankle Foot Orthosis (HKAFO)		Instability or weakness at the hip, knee, and ankle	See Section 1 for documentation requirements
CUSTOM Knee Ankle Foot Orthosis (KAFO)		Inability or weakness at the hip, knee, and ankle Knee hyperextension with ankle/foot weakness	See Section 2 for documentation requirements
Soft Neoprene Knee Orthosis (KO)		Strained or sprained ligaments and mild MCL and LCL support Chondromalacia of the patella Patellar Tendonitis Patella dislocation or subluxation	See Section 3 for documentation requirements
ACL/Ligament KO		ACL, PCL, MCL, LCL injury or following repair Chronic knee ligament instability Conservative pre-operative and post-operative joint stabilization	See Section 3 for documentation requirements
Osteoarthritis KO		Medial or lateral knee osteoarthritis Ligament support	See Section 3 for documentation requirements
CUSTOM Knee Orthosis		Varus or valgus deformities with instability Knee osteoarthritis ACL, PCL, MCL, LCL injury or following repair	See Section 4 for documentation requirements



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Knee Orthoses (KOs and KAFOs)

<p>Section 1 MD, DO, PA, or NP notes must mention:</p>	<p>Patient is ambulatory (or has potential to ambulate) with weakness or deformity of the foot/ankle, knee, and hip AND Requires stabilization for medical reasons AND Has the potential to benefit functionally from device</p>
<p>Section 2 MD, DO, PA, or NP notes must mention:</p>	<p>Patient is ambulatory (or has potential to ambulate) with weakness or deformity of the foot/ankle, knee AND Requires stabilization for medical reasons AND Has the potential to benefit functionally from device</p>
<p>Section 3 MD, DO, PA, or NP notes must mention:</p>	<p>Patient is ambulatory (or has potential to ambulate) with weakness or deformity of the knee that requires stabilization AND Documented knee instability or joint laxity from an objective test (Medicare requires this even if diagnosis is Osteoarthritis) AND Diagnosis falls under the approved diagnosis code</p>
<p>Section 4 MD, DO, PA, or NP notes must mention:</p>	<p>Patient is ambulatory (or has the potential to ambulate) with weakness or deformity of the knee that requires stabilization AND Documented knee instability or joint laxity from an objective test (Medicare requires this even if diagnosis is Osteoarthritis) AND Diagnosis falls under the approved diagnosis code AND Reason for custom including deformity, muscle mass, or size of thigh/calf</p>