

## Why Aren't Orthotics Always Covered by Insurance?

This is one of podiatry's biggest conundrums.

BY MICHAEL J. KING, DPM

xperts in the coding and reimbursement world are always getting questioned about why orthotics are not covered by all the insurances. This has been an ongoing conundrum over the years, as many desire universal coverage for codes such as L3000, the gold standard code. The conundrum is not so much which code to use in the average practice but rather: does one want them covered?

Experts in biomechanics, orthotics and prosthetics (O & P), and DME know and espouse the incredible benefits to patients of orthotic devices when properly prescribed,



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fitted, and utilized. The rest of the world seems not so learned. Those of us who manage these biomechanical issues on a daily basis know the benefits and seek to utilize the appropriate devices when we can.

Of course, many patients may push back due to higher deductibles, what they see as expensive devices or simply an ignorance of the great need for the device. Competition has arisen from all the big box entities that now sell all sorts of over-the-counter (OTC) devices and purport that they work as well or better than a prescribed device. This is not to say that there are not patients who benefit from those devices, but those patients would not think of buying their eyeglasses in the same manner.

Payers appear to suffer from that same ignorance, and constant education to those entities must continue if we are ever to have more coverage. As ERISA-type plans continue growing, it is essential that we have studies and proof provided to those employers of the great benefit of using and covering orthotic devices.

So you ask, "What is the conundrum?" Do we want these universally covered? Do we want them never covered? Not unlike at-risk foot care, some want easier universal coverage, and some want no coverage. Cash-based services require many less hoops to jump through, less paperwork, and simply good education to get patients into the devices. Coverage for these products make it easier to get the patients the service they need but may not want to pay for. Coverage is present in many payer systems but often does not even meet the expenses incurred by the physician's practice. Be careful what you ask for.

The bottom line here is that we need to provide and properly code for what is the most medically necessary device our patients need for their pathology. Dealing with the system and the debate over what is or should be covered will continue until it is taken out of our hands, if ever. **PM** 

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