

Bulletin Number: MSA 19-25

Distribution: Orthotists, Prosthetists, Durable Medical Equipment Providers,

Physicians, Non-Physician Practitioners, Medicaid Health Plans,

Integrated Care Organizations (ICOs)

Issued: August 30, 2019

Subject: Revised Standards of Coverage for Lower Extremity Orthotics

Effective: October 1, 2019

Programs Affected: Medicaid, Healthy Michigan Plan, Children's Special Health Care

Services (CSHCS)

This policy applies to Medicaid Fee-for-Service (FFS). Medicaid Health Plans (MHPs) and Integrated Care Organizations (ICOs) must provide the full range of covered services described in this policy at a minimum and may choose to provide services over and above those specified. For beneficiaries enrolled in an MHP or ICO, the provider must check with the beneficiary's health plan for prior authorization (PA) requirements.

The purpose of this bulletin is to notify providers of revisions made to the standards of coverage for lower extremity orthotics. The revisions indicated in this bulletin are effective October 1, 2019.

Standards of Coverage

The Michigan Department of Health and Human Services (MDHHS) covers lower extremity orthotics (including night splints) regardless of diagnosis for the following manifestations:

- Promote healing and/or proper alignment/positioning following injury, procedure (e.g., serial casting), or surgery of the lower extremity.
- Support lower extremities due to muscle weakness or abnormal muscle tone (e.g., high/low/fluctuating tone) of permanent or long-standing duration (six months or longer).
- Support, correct or improve:
 - o Biomechanical alignment (e.g., pronation, supination, varus or valgus).
 - Static or dynamic contractures.
 - o Congenital or acquired deformities of the lower extremities.

Current policy definition, documentation, prior authorization and payment rules remain unchanged.

Manual Maintenance

Retain this bulletin until the information is incorporated into the Michigan Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mailed to ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

Approved

Kate Massey, Director

Medical Services Administration