



## **Medicare Indications and Limitations of Coverage and/or Medical Necessity**

For any item to be covered by Medicare, it must 1) be eligible for a defined Medicare benefit category, 2) be reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member, and 3) meet all other applicable Medicare statutory and regulatory requirements. For the items addressed in this medical policy, the criteria for "reasonable and necessary" are defined by the following indications and limitations of coverage and/or medical necessity.

For an item to be covered by Medicare, **a written signed and dated order must be received by the supplier before a claim is submitted to the DMERC.** If the supplier bills for an item addressed in this policy without first receiving the completed order, the item will be denied as not medically necessary.

A knee brace (L1832 or L1845) is covered when it is ordered for one of the following indications:

- \* To reduce pain by restricting mobility of the knee; or
- \* To facilitate lateral or medial compartmental arthritis; or
- \* To facilitate healing following a surgical procedure on the knee or related soft tissue; or
- \* To otherwise support instability of knee joint.

If a knee brace is provided and the coverage criteria are not met, the item will be denied as not medically necessary.

**Note:** Medicare policies change frequently. Always check with your local **DMERC** for updated Medicare information.