

University of Michigan Orthopedic shoes and orthotic inserts

Applies to:

- BCN Advantage Individual BCN Advantage Group Both

BCN Advantage HMOSM
BCN Advantage HMO-POSSM



Medicare and more

Blue Care Network of Michigan is a nonprofit corporation and independent licensee of the Blue Cross and Blue Shield Association.

Orthopedic shoes and orthotic shoe inserts

Orthopedic shoes and orthotic shoe inserts intend to correct an abnormal or irregular walking pattern by slightly altering the angles at which the foot strikes a walking or running surface.

Original Medicare

Original Medicare Part B covers the furnishing and fitting of either orthopedic shoes or orthotic shoe inserts each calendar year, if you have diabetes and severe diabetic foot disease:

- One pair of custom-molded shoes and inserts
- One pair of extra-depth shoes

Medicare also covers:

- Two additional pairs of inserts each calendar year for custom-molded shoes
- Three additional pairs of inserts each calendar year for extra-depth shoes

Medicare will cover the orthopedic shoes only as a part of a leg brace. Heel replacements and shoe transfers involving shoes on a covered brace are also covered. Inserts and other shoe modifications are covered if they are on a shoe that is an integral part of a covered brace and if they are medically necessary for the proper functioning of the brace. Shoes and related modifications, inserts, heel/sole replacements or shoe transfers billed without a KX modifier will be denied as noncovered because coverage is statutorily excluded.

Medicare lists the following devices as orthotics under the heading of Durable Medical Equipment (DME):

- Bracing for ankle, foot, knee, back, neck, spine, hand, wrist, elbow
- Orthopedic shoes as a necessary part of a leg brace
- Prosthetic devices like artificial limbs.

U of M BCN Advantage enhanced benefit

BCN Advantage is a Medicare Advantage plan that provides at least the same level of benefit coverage as Original Medicare (Part A and Part B) and may provide enhanced benefits beyond the scope of Original Medicare within a single health care plan. This flexibility allows BCN to offer enriched plans by using Original Medicare as the base program and adding desired benefit options.

Coverage up to 100% of the approved amount for orthopedic shoes and orthotic inserts is provided to members of the University of Michigan BCN Advantage plan. Since Original Medicare limits coverage for orthopedic shoes and orthotic inserts, the group determines the scope of the benefit, reimbursement methodology, maximum allowed payment amounts and member cost sharing for those with group-based coverage.

Note: This enhanced benefit does not require the orthotic shoe to be attached to a leg brace

Blue Care Network of Michigan

bcbsm.com/providers

Conditions for payment

The table below specifies payment conditions for orthopedic shoes and orthotic inserts.

Conditions for payment	
Eligible provider	Contracted Northwood provider
Payable location	No restrictions
Frequency	No restrictions
CPT/HCPCS codes	L3000 - L3649
Diagnosis restrictions	No restrictions
Age restrictions	None

Reimbursement

To find BCN Advantage plan's maximum payment amount for orthopedic shoes and orthotic inserts, visit our provider portal, [Avality Essentials](#). Within Secure Provider Resources, click on BCN Fee Schedules under the Fee Schedules tab and follow the instructions. The provider will be paid the lesser of this allowed amount or the provider's charge, minus the member's cost share. This represents payment in full and providers aren't allowed to bill the member for the difference between the allowed amount and the charge.

Member cost share

- BCN Advantage providers should collect the applicable cost share from the member at the time of the service, when possible. Cost share refers to a flat dollar copayment, a percentage coinsurance or a deductible. Providers can only collect the appropriate BCN Advantage cost share amounts from the member.
- If the member elects to receive a noncovered service, he or she is responsible for the entire charge associated with that service.
- Providers may not have members sign an Advance Beneficiary Notice of Noncoverage to accept financial responsibility for noncovered items. If there is any question about whether an item is covered, seek a coverage determination from Blue Care Network before providing the item to the member. If a provider issues a noncovered item to a member without first obtaining a coverage determination, the member must be held harmless for all charges except for any applicable cost share.

To verify benefits and cost share, providers may use our provider portal or call 1-800-344-8525.

Billing instructions for providers

1. Bill services on the CMS 1500 (02/12) claim form, UB 04 or the 837 equivalent claim form.
2. Use the BCN Advantage unique billing requirements.
3. Report CPT/HCPCS codes and diagnosis codes to the highest level of specificity.
4. Report your National Provider Identifier number on all claims.
5. Use electronic billing:
 - a. **Michigan Providers:** Copies of the ANSI ASC X 12N 837 and 835 Institutional Health Care Claim and Health Care Claim Payment/Advice (Blue Cross Electronic Data Interchange (EDI) Institutional 837/835 Companion Documents) are available on the Blue Cross website under the reference library section at bcbsm.com/providers/help/edi/.
 - b. **Providers outside Michigan:** Members of BCN Advantage HMO-POS plans have a point-of-service benefit offered through the nationwide network of Blue Plan Providers via the Blue Cross and Blue Shield Association. Providers outside Michigan who participate with Blue plans can provide preauthorized routine and follow-up care as necessary. Contact your local Blue plan for billing instructions.

Coverage outside Michigan for members of BCN Advantage HMO plans is limited to medical emergencies, urgently needed services and renal dialysis unless BCN Advantage has approved the out-of-network services, which members must request in advance.

6. Send paper claims to:
 - BCN Advantage Claims
 - Blue Care Network
 - P.O. Box 68753
 - Grand Rapids, MI 49516-8753

Revision history

Policy number: BCNA

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Revised: