



FOOT CARE SPECIALISTS, P.C.

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CUSTOM MOLDED ORTHOTIC COVERAGE CHECK

DATE: _____ TIME: _____

INSURANCE CARRIER: _____

PHONE: _____ SPOKE WITH: _____

POLICYHOLDER: _____

ID/POLICY #: _____ GROUP#: _____

PATIENT NAME: _____

DIAGNOSIS	ICD-9 CODE
Plantar fasciitis	728.71
Pronation Abnormal	736.79
Neuroma	355.6
Tendonitis/Capsulitis	726.90
Pain in foot	729.5
Achilles Tendonitis	726.71
Other _____	_____

PROCEDURE CODE: L3000

KEY TERMS:

- Orthotics are custom molded shoe inserts not attached to leg brace.
- Orthotics are considered Durable Medical Equipment (DME).

QUESTIONS TO ASK WHEN CHECKING BENEFITS:

- Does my plan allow coverage for custom molded orthotics? _____
- What percentage will my orthotics be paid at? _____
- Do I have a deductible to meet for DME and, if so, how much is left to meet? _____
- Does this service require prior authorization? _____

PRICE: \$450.00

ORTHOTICS COVERED: YES _____ NO _____