



Knee Orthoses Documentation of Knee Instability Reminder

CGS wants to remind suppliers and providers that knee orthosis coverage for codes L 1832, L 1833, L 1843, L 1844, L 1845, L 1846, L 1850, L 1851, and L 1852 requires 1 of 2 pathways to meet coverage criteria:

- Recent Injury or Surgical Procedure; or
- Ambulatory with Knee Instability
 - o The treating practitioner is responsible for understanding the appropriate treatment/testing necessary based on the beneficiary's clinical presentation.
 - o Medical records must include documentation of the examination of the beneficiary and an objective description of joint laxity.

■ **Includes testing of the beneficiary (such as varus/valgus instability, anterior/posterior Drawer test, not all inclusive)**

■ **The objective test needs to show that the test resulted in an instability of the knee**

Note: The instability of the knee joint is a result of insufficiencies in the ligaments of the knee complex. A result of instability is a separate finding from other deficits found on exam, such as a malalignment or meniscus conditions. A subjective statement of instability or an X-Ray report would not be sufficient documentation to support the findings of knee instability.

Read the Local Coverage Determination (LCD)- Knee Orthoses (L33318) !E&I2I for full coverage details

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