



YAKIMA
Orthotics
& Prosthetics
313 S. 9th Avenue
Yakima, WA 98902
(509) 248-8040
fax (509) 594-4909

TRI-CITIES
Orthotics
& Prosthetics
317 Wellsian Way
Richland, WA 99352
(509) 943-8561
fax (509) 943-1037

KITTITAS
Orthotics
& Prosthetics
1206 N. Dolarway Rd #110
Ellensburg, WA 98926
(509) 925-7700
fax (509) 357-1340

Dear Physician:

For a prefabricated LSO (lumbo-sacral-orthosis) or prefabricated TLSO (thoraco-lumbo-sacral-orthosis) to be covered by Medicare, all applicable Medicare statutory and regulatory requirements must be met. Medicare requires a physical evaluation of the patient, and **the following bullet points must be included in the physician's chart note** (Medicare does not consider a letter part of the medical record). Please fax any Medicare compliant chart notes to our office.

The physician must document AND DISCUSS the following:

1. Patient requires a LSO or TLSO

***The physician must also document AND DISCUSS at least one of the following:**

- a. The orthosis is medically necessary to reduce pain by restricting mobility of the trunk; **or**
- b. The orthosis is medically necessary to facilitate healing following an injury to the spine or related soft tissues; **or**
- c. The orthosis is medically necessary to facilitate healing following a surgical procedure on the spine or related soft tissues; **or**
- d. The orthosis is medically necessary to otherwise support weak spinal muscles and/or a deformed spine.

Thank you, and please let me know if you have any questions or concerns.