Pain Rehab Products, Inc.

2339 Weldon Parkway
St. Louis, MO 63146
Phone: (314)832-7246 Fax: 314-832-1430
www.painrehabproducts.com

Prescription & Certificate of Medically Necessity

Patient's Name: _____ *Patient's DOB:* _____/_____/_____

Patient's Address: _____

Diagnosis Codes ICD-10 Primary: _____ Secondary: _____

Knee Orthosis

☐ L1833 Brand/Model: _____

☐ L1851 Brand/Model: _____

☐ L1852 Brand/Model: _____

☐ HCPCS Code:_____ Brand/Model: _____

Reason for Custom KO:

_____

Duration: Patient has had this condition for ____ Months ____ Years

Length of Need: **Months:** _____ (99 = lifetime)

☐ Right ☐ Left

Physician Information

I certify that the equipment and supplies I prescribed are Medically Necessary for this patient's well being. In my professional opinion, the equipment is both reasonable and necessary in reference to the accepted standards of medical practice and treatment for this patient's condition. It is NOT prescribed as convenience equipment. Substitution for this device is NOT ALLOWED without my written approval.

Physician's Signature: _____ Date: _____/_____/_____
(Stamped Signatures are not acceptable)

Printed Physicians Name: _____ NPI #:_____

Physician's Address: _____

Required for ALL Medicare Patients

Chart Notes & Rx must be submitted together. Include chart notes supporting Medical Necessity (clinical documentation must support the need, use and benefit the knee brace will provide)

Patient Chart Notes Must Support the Following for all knee bracing:
Knee instability must be documented by examination of the beneficiary and objective description of joint laxity (e.g., varus/valgus instability, anterior/posterior Drawer test). Knee bracing will be denied as not reasonable and necessary when the beneficiary does not meet the above criteria for coverage. For example, they will be denied if only pain or a subjective description of joint instability is documented.

Along with this RX, please fax the patient's medical records, insurance card and demographics to (314) 832-1430. Pain Rehab Products, Inc. will provide the insurance pre-certification, patient fitting and follow-up.