



## CUSTOM MADE ORTHOTICS

**THIS FORM MUST BE FILLED OUT AND COMPLETED BEFORE YOUR APPOINTMENT!**  
**PLEASE BRING THE FORM TO YOUR APPOINTMENT!**  
**ORTHOTICS CANNOT BE ORDERED WITHOUT A COMPLETED FORM!**

**Patient's Name:** \_\_\_\_\_

### **Information to Ask Your Insurance Carrier:**

Billing code used for orthotics is L3000. **2 units will be billed for left and right.**  
Make sure you give your insurance representative this code when checking your benefits!

1. Are orthotics covered by my plan?  YES  NO
2. Does my insurance cover more than 1 pair a year?  YES  NO
  - a. If you answered YES to #2, how many per year are covered? \_\_\_\_\_
  - b. If you answered YES to #2, at what percentage are they covered? \_\_\_\_\_%
3. Is Pre-Authorization required?  YES  NO
  - a. If you answered YES to #3, please call the office at 703.769.8420, extension 1634 to inform us you that need Pre-Authorization!
4. Do I have a deductible?  YES  NO
  - a. If you answered YES to #4, how much is my deductible per year? \$\_\_\_\_\_
5. Has my deductible been met?  YES  NO
  - a. If you answered NO to #5, how much is remaining? \$\_\_\_\_\_

**Name of Insurance:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Date Called:** \_\_\_\_\_

### **Important Notes:**

- It is your responsibility as a patient to determine whether or not your insurance carrier covers prescription orthotics, and whether they cover them in full. If your insurance carrier **does not** cover custom orthotics, please call the office and our staff will inform you of your financial responsibility.
- Payments are **required** at the time of your visit! Orthotics will not be ordered until payments are made.
- If your insurance requires pre-authorization, it is your responsibility to call the office **before** your appointment so that we can obtain authorization. **You will not be seen for your appointment if authorization has not be obtained and if you do not come you're your sheet filled out! This applies to patients that have a primary and secondary insurance as well.**
- **UNITED HEALTH CARE and TRICARE REQUIRE AUTHORIZATION!**