



## ***Prosthetic Liner Documentation Requirements***

For prosthetic liners to be covered by Medicare, all applicable Medicare statutory and regulatory requirements must be met. This includes of the following:

- Documentation of a face to face appointment with the patient within six months of the written order.
- Letters of medical necessity are not accepted, Medicare does not consider a letter part of the medical record.
- All notes need to contain the physician's printed name, signature, patient name and date.
- Stamped, illegible signatures or notes are not accepted.
- All documentation needs to be contained within the physician's clinical notes.
- Addendums need to be added by the prescribing physician.

### ***The physician must document AND DISCUSS the following:***

- This patient continues their prostheses. New liners are medically necessary because of the patient change in size, activity level or damage to the liner and are an integral part of the prosthesis, they decrease skin irritation and suspend the prosthesis in place.

Additional information is available at

<https://med.noridianmedicare.com/web/jddme/policies/documentation-checklists>

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

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