

Hi-Tech Artificial Limbs, Inc.

Documentation Requirements for Lower Limb Prosthetics

The staff at Hi-Tech Artificial Limbs, Inc. prides itself on the working relationships we have with our patient's care teams. Insurance regulations require notes from the patient's referring physician regarding their prosthetic care to be included as part of their medical record, which is submitted along with our prosthetist's notes. Following is Medicare's criteria for coverage of all Lower Limb Prosthetics, which can also be found in additional medical coverage policies.

Medicare Overview

Medical Necessity for prosthetic components or additions to the prosthesis is based on:

1. The patient's past history (activities),
2. The patient's current condition (residual limb and medical conditions that might affect the patient's ability to use the new prosthesis), and
3. Desire to ambulate. (Desire to use the new prosthesis and get back to those previous activities)

A lower limb prosthesis is covered when:

4. Prescribed by a physician
5. The member will reach or maintain a defined functional state (K-level) within a reasonable period of time, and
6. The member is motivated to ambulate

Medicare requires that all 6 criteria must be documented in the physician's medical record. Following is a guide:

NOTES

The following information from the prescribing physician's medical records should be included: Recent physical evaluation (focus should be on the amputation, the prosthesis, and the ambulatory difficulties).

History of Amputation: Cause, date and side of amputation(s); clinical course, therapeutic interventions & results, prognosis.

Physical Examination:

Weight, Height, Weight Loss/Gain.

Cognitive ability to use the use and care for the new prosthesis

Condition of residual limb

Cardiopulmonary, musculoskeletal, neurological, strength, ROM, gait, balance, coordination

Functional Limitations: Describe the nature and extent of any functional limitations, whether from current prosthesis, current condition, or comorbidities (e.g., decreased pulmonary reserve, disabling cardiovascular, neuromuscular, peripheral vascular or musculoskeletal conditions).

Ambulatory Assistance: Used prior to the amputation and/or current. Is it routine, situational, temporary? Explain

Document Medical Necessity in K-Level Terms:

(see descriptions below)

1. Patient's activities prior to amputation
2. Patient's current activities along with any functional limitations as identified above
3. Describe the patient's desire and motivation to ambulate with the new prosthesis.
4. Activities that the patient desires to get back to (and has the potential for) using the new prosthesis

Document the condition/status of the current prosthesis and the reason for replacement of each component:

If worn/broken, describe the condition of each component that needs to be replaced. If patient's physical condition or functional needs have changed, describe why prosthesis/component no longer meets his/her needs.

Describe past experience with Prostheses/Components:

Describe what has been tried in the past and the results.

Recommendation for new components: Include medical reason for your decision.

K-Level: If the patient has potential to reach a higher K-level designation in the future, include a treatment plan that will achieve this increase in functional level, and what it will take to get there (e.g. physical therapy, gait training, etc.). The plan should specify in your opinion approximately how long it will take the patient to be functioning at the potential K-Level and address use of the mobility

Functional Capabilities for Lower Extremities (K-Levels)

Level K-0: Does not have the ability/potential to ambulate or transfer safely with/without assistance

Level K-1: Home Ambulator with ability/potential for transfers or ambulation on level surfaces at fixed cadence.

Level K-2: Limited Community Ambulator with ability/potential for ambulation and to traverse low level environmental barriers

Level K-3: Full Community Ambulator with ability/potential for ambulation with variable cadence and to traverse higher level barriers

Level K-4: Has the ability or potential for prosthetic ambulation that exceeds basic ambulation skills, exhibiting high impact, stress, or energy levels. Typical of the prosthetic demands of the child, active adult, or athlete.