

Dear Referring Physician,

Gainesville Prosthetics would like to thank you for your referrals to our clinic. We strive to provide the most effective care for each of our patients. In order to increase the efficiency of patient treatment plans and expedite their journey to optimal care, we have a few requirements necessary.

For a replacement socket to be covered by insurance, all applicable statutory and regulatory requirements must be met. Insurance requires a physical evaluation of the patient, and the following points must be included in the physician's chart note. As of January 2021, a letter is **not** considered a part of the medical record. Please fax any compliant chart notes to our office.

The reason for replacement must be documented and discussed by the treating / ordering physician, in the medical record, and must fall under one of the following:

- 1. The patient continues to use their prosthesis AND...
- 2. Replacement of prosthetic socket is reasonable and necessary (ex: see detailed prescription) AND...
- A change in the physiological condition of the patient resulting in the need for socket replacement (ex: changes in weight or size of residual limb) OR....
- 4. Lost, stolen or irreparable damage in the condition of the socket, or in part of the socket resulting in the need for a replacement and the original device fills the beneficiary's medical needs OR....
- 5. The condition of the prosthetic socket, or part of the socket, requires repairs and the cost of such repairs would exceed 60% of the cost of a socket replacement

The physician must also document AND DISCUSS the following:

- 6. Patient is still motivated to ambulate AND...
- 7. Patient's current medical condition AND...
- 8. Discuss the patient's current functional level from one of the following (K0 through K4):

K0 This patient does not have the ability or potential to ambulate or transfer safely with or without assistance and a prosthesis does not enhance their quality of life or mobility.

K1 This patient has the ability or potential to use a prosthesis for transfers or ambulation on level surfaces at fixed cadence - a typical limited or unlimited household ambulator.

K2 This patient has the ability or potential for ambulation with the ability to traverse low level environmental barriers such as curbs, stairs, or uneven surfaces - a typical community ambulator.

K3 The patient has the ability or potential for ambulation with variable cadence - a typical community ambulator with the ability to traverse most environmental barriers and may have vocational, therapeutic, or exercise activity that demands prosthetic use beyond simple locomotion.

K4 The patient has the ability or potential for prosthetic ambulation that exceeds basic ambulation skills, exhibiting high impact, stress, or energy levels - typical of the prosthetic