Rifton Prone Stander

Sample Letter of Medical Necessity



EVERY REASONABLE EFFORT HAS BEEN MADE TO VERIFY THE ACCURACY OF THE INFORMATION. HOWEVER, THE SAMPLE LETTERS OF MEDICAL NECESSITY ARE NOT INTENDED TO PROVIDE SPECIFIC GUIDANCE ON HOW TO APPLY FOR FUNDING FOR ANY PRODUCT OR SERVICE. HEALTH CARE PROVIDERS SHOULD MAKE THE ULTIMATE DETERMINATION AS TO WHEN TO USE A SPECIFIC PRODUCT BASED ON CLINICAL APPROPRIATENESS FOR A PARTICULAR PATIENT AND APPLICATIONS TO ANY FUNDING SOURCE MUST ACCURATELY REFLECT THE FACTS UNIQUE TO INDIVIDUAL APPLICATIONS. THIRD PARTY PAYMENT IS AFFECTED BY NUMEROUS FACTORS AND RIFTON CANNOT GUARANTEE THE SUCCESS IN OBTAINING INSURANCE OR THIRD PARTY PAYMENTS OF ANY KIND.



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Components of a letter of Medical Necessity

Describe who you are, what you want, and beneficiary's name:

As John Doe's therapist, I am requesting funding authorization for a Rifton Prone Stander.

Give an explanation of the beneficiary's condition, diagnosis, or nature of injury:

John Doe has _____ and is currently (describe ability to sit, stand, and walk including amount of assistance needed for each activity pertinent to the piece of equipment).

Discuss the impact of the above mentioned diagnosis on the client's and caregiver's life. Note the limitations without the requested equipment:

Because John Doe is confined to a wheelchair, he does not have the muscle strength or muscle tone to sit independently, stand, or walk. He therefore does not have the opportunity to be upright and interact with his peers. Like all typical children, John needs opportunities to challenge his musculoskeletal system in order to promote growth and strength of the bones and muscles. This is achieved through weight-bearing and mobility. Because of his motor impairments, John Doe requires the Rifton Prone Stander to assist him in the upright weight-bearing position to allow him to perform to his greatest functional potential.

Prolonged positioning in a wheelchair causes flexion contractures at hips and knees that require corrective surgeries and increased therapy intervention. This has negatively impacted children both therapeutically and medically. It is a costly and cyclical problem that can be improved and often avoided with early intervention in providing the proper equipment that supports being upright and gives opportunities for independent mobility.

As John Doe grows and his functional abilities decrease, the risk of caregiver back injuries grows. This is due to increasingly difficult transfers.

Describe the benefits to the client and caregiver that the equipment will provide. Discuss adjustments for growth and psychological benefits:

The Rifton Prone Stander will support even the most significantly involved child in an upright position that is comfortable and therapeutic in many ways. Positioning hips and knees in prolonged extension helps prevent contractures over time. The upright standing position also improves respiration, digestion, circulation, bowel/bladder function, and bone development.

When children are at eye-level with their peers, their social, emotional, and psychological development is enhanced—all necessary for the growth of a well-rounded and healthy child. This inclusion is a profound motivator for movement. A Rifton Prone Stander supports the child in the front of the body and allows for independent head and neck control. In this position, John Doe will also have the opportunity to strengthen his postural trunk muscles. A tray attached to the front of the stander can be used to engage the child in midline activities and eye-hand coordination. The tilt of the front board can be adjusted to accommodate different weight bearing abilities and adjusted as the child makes progress towards independent weight bearing.

All this, in turn, decreases John's dependence on his caregiver and makes functions such as transfers easier.

As John Doe progresses, supports can be lowered or taken away, further improving overall muscle strength and control. This system is also adjustable for growth in height and weight.



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Itemization of Pacer Gait Trainer:

Description	Medical Necessity	Cost
Prone Stander	Supports client in an upright, forward leaning position that requires adequate head control and promotes extensor muscle strength and assists in limiting flexor muscle tightness especially at the hip. Prone positioning allows client to prop on elbows and helps to facilitate more advanced postures and activities such as reaching, weight shifting, and midline alignment of the upper extremities. Allows for graduated increase in weight bearing through angular adjustment of the board. Weight bearing has been shown to be beneficial for strength, bone mineral density, intestinal motility, postural control, tone reduction, musculoskeletal development, pulmonary function, and integumentary integrity.	
Tray	Allows for positioning of educational tools and communication systems that enhance learning and provide motivation to remain upright. Stable base from which child can engage in midline activities and practice hand-eye coordination.	
Extra pair of trunk lateral support blocks	Provide postural support and cueing to promote functional alignment and disruption of dysfunctional patterns. Provides extra lateral support for clients with inadequate trunk control. Adjustable width-wise and up and down.	
Knee lateral support blocks	Provides lateral support to the lower extremities to promote postural alignment and enhance stability. Adjust vertically and horizontally, and rotate to give comfortable positioning.	
Additional wide strap	Additional trunk support and cueing to maintain body alignment.	
Round abduction block	Maintains 4 inches of comfortable lower extremity separation to control spastic muscles that cause legs to scissor.	
Collar for round abduction block	Adds 2 more inches of separation to round abduction block. Increased abduction is required to limit tone related adduction, promote appropriate weight bearing, and decrease risk of skin breakdown.	



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Itemization of Pacer Gait Trainer:

Description	Medical Necessity	Cost
Round abductor with hip stabilizer	Helps maintain hip extension and knee positioning. Promoting hip extension improves postural alignment and decreases risk of contracture. Maintains a comfortable 4 inches of knee separation. Increased abduction is required to limit tone related adduction, promote appropriate weight bearing, and decrease risk of skin breakdown.	
Adjustable abduction wedge	Allows for 3-11 inches of lower extremity separation for therapeutic positioning. Appropriate angles of abduction help to minimize scissoring of lower extremities caused by adductor muscle tone.	
Adjustable abduction wedge with hip stabilizer	Helps maintain hip extension and knee positioning. Promoting hip extension improves postural alignment and decreases risk of contracture. This device also provides 3-11 inches of abduction, depending on how much is desired. Increased abduction is required to limit tone related adduction, promote appropriate weight bearing, and decrease risk of skin breakdown.	
Sandals	Provides correct positioning of client's feet. A stable base facilitates functional postures and reaching out of the cone of stability. Sandals can also assist in disruption of dysfunctional tone related alignments of the client's feet and lower extremities.	
Wedges	Wedges raise the heel or toe of each foot. Several wedges can be stacked to accommodate varying leg lengths. Wedges assist in limiting spasticity, promoting greater range of motion and cueing for postural alignment.	
Hand anchor	Helps position user's hands firmly, anywhere on the tray. Provides stability and security to perform activities such as eating and fine finger motion practice.	



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Make the person real

As a growing child, John Doe needs opportunities to advance his skills and challenge his musculoskeletal system, and interact with his peers. This can be accomplished in the upright and weight bearing position.

Condemning a person to life in a wheelchair has many negative effects that encompass both medical and economic areas. Over time, muscle contractures develop at the hip and knees causing significant tightness, such that transfers out of the wheelchair to bed, bath or toilet become increasingly difficult. As the individual ages, size and weight become factors that contribute highly to caregiver injury. Including the decline of bowel and bladder function, all these factors increase care-giving and medical intervention that in turn, raise the costs.

Without proper equipment John Doe will inevitably require surgeries to correct deformities caused by the factors mentioned.

Reiterate and summarize the cost benefits:

The cost of the Rifton Prone Stander is a fraction of the cost of just one surgery that it can prevent. With continued gains of strength and mobility, John Doe's medical and custodial needs can be decreased.

Because the Rifton Prone Stander accommodates for growth, it is most desirable for both the beneficiary and insurer.

Considering all this, the Rifton Prone Stander will not only meet the needs of John Doe, his family, and caregiver, but will also be most cost-effective to the insurer.

Don't forget to include pictures of the Prone Stander.



Small Prone Stander (E930)

Medium Prone Stander (E940)

Large Prone Stander (E950)