

Medicare Update Knee Policy

Medicare has recently updated their knee policy. Claims will be denied as not medically necessary when the patient's condition does not meet certain criteria for knee coverage.

Claims for the following L codes will be denied as not medically necessary when the patient doesn't meet the criteria for coverage. For example, they will be denied if only pain or a subjective description of joint instability is documented.

- **L1832** (Playmaker, Breg T-Scope, and KO adj jnt pos rigid Support) or RoadRunner
- **L1843** (KO Single Upright Custom Fit)
- **L1845** (KO w/Adj Flex/Ext Rotat Prefab and OTS ACL Brace) Breg Fusion
- **L1850** (KO Swedish Type)

Physicians must document the following tests in their dictation or Mary Free Bed will not be able to provide

these braces for your patients without written consent from the patient. The patient must state that they understand their prescribed brace will not be a covered benefit and they will be responsible for the cost of the brace.

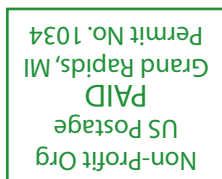
Mary Free Bed will work out payment arrangements, upon patient qualification. Please be aware of this change and let your patient know they will be responsible for the cost of the brace. The following tests will be acceptable to allow Medicare to cover the costs of the aforementioned knee braces:

- Lachman Test
- Anterior Drawer Test
- Pivot Shift Test
- Posterior Drawer Test
- Varus and Valgus Instability
- Varus Stress test
- External Rotation Recurvatum Test (Hughston Test)
- Failed Total Knee Arthroplasty • Dial Test
- Neurologically Impaired Gait Test

If you would like a description of the tests listed above, please visit our website, www.maryfreebedoandp.com. If you have more questions or would like more information regarding this policy, please contact Mary Free Bed Orthotics, 616.242.0315. If you have questions regarding PECOS, please visit the Medicare PECOS website.

RETURN SERVICE REQUESTED

235 Wealthy St SE
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Elevated Vacuum Sockets Available at Mary Free Bed Prosthetics

The prosthetics industry is growing and advancing every year. The elevated vacuum socket is made with some of the newest technology available for amputees.

Residual limbs are prone to regular daily volume fluctuations. Volume loss is a common side effect prosthetic users experience. Volume loss can lead to an inconsistent fit, frequent prosthetic adjustments, tissue breakdown, ulceration, and premature wear on the prosthetic socket interfaces.

When the amputee begins the day they are at a baseline volume, as the day progresses, volume drops as the positive pressures of the socket against the residual limb drive fluid proximally. In many instances, people with an amputation must increase the prosthetic sock ply to maintain an accurate socket fit throughout the day.

When a patient is lying supine, sleeping normally, the residual limb is no longer receiving weight-bearing forces and fluid returns distally and volume returns to its initial baseline.

These mechanisms might suggest the combination of reduced fluid that is driven from the limb during stance and the increase in negative pressure from the elevated vacuum drive of fluids in swing maintains the volume better, when compared with other suspension systems.

Some practitioners who have fit elevated vacuum sockets have suggested the alteration between positive and negative pressures in a well fit suction socket (vacuum assisted socket system, VASS) may improve blood circulation and tissue oxygenation within the residual limb.

Medicare, Aetna, and Blue Cross, as well as most other insurance companies consider the VASS an artificial limb component that is used with the patient's

protheses. This means it is a covered prosthetic addition, when medically necessary for amputees, on the same basis as any other artificial limb.

Elevated vacuum technology:

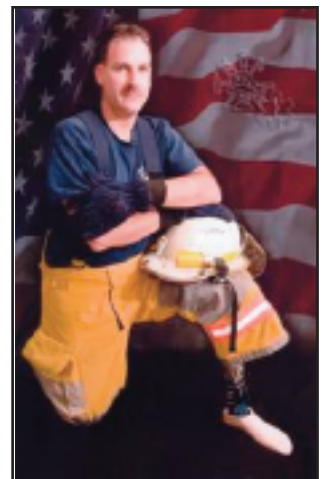
- promotes natural fluid exchange that regulates volume fluctuation in the residual limb
- reduces force on the residual limb
- increase suspension and proprioception

The enhanced linkage from the vacuum between the liner and the socket wall decreases the perception of the prothesis weight and promotes an improved gait.

Elevated vacuum technology reduces friction in the socket between the limb and the liner. By reducing the friction in the socket, tissue breakdown may be prevented and the life of the interface may be extended.

Elevated vacuum technology also enhances the connection between the patient and the prothesis, resulting in enhanced proprioception. The pressure in the socket can be equalized, allowing the user to bear weight over the entire residual limb. In a conventional patellar tendon bearing socket (PTB) where only portions of the socket were weight bearing, the elevated vacuum socket allows total surface bearing over the entire residual limb.

Elevated vacuum technology is similar to traditional suction suspension. The interface between the



Jack Boden, a patient and volunteer fireman is seen wearing his Otto Bock Harmony

amputees' residual limb and their prosthesis is sealed with an airtight suspension sleeve. The suspension sleeve extends from the outer surface of the socket to below the proximal thigh of the residual limb.

A pump is incorporated into the elevated vacuum system as far as distally as possible to push air from the limb-socket interface. This air seal prevents the limb from pistoning out of the prosthesis. Elevated vacuum technology creates a stronger vacuum than the usual one-way air valve and takes the suction concept further.

The strength of the elevated vacuum ranges between two and 20 pounds per square inch (PSI). The reduced pistoning created in the socket will be noticed by the patient immediately.

Elevated vacuum technology has a few drawbacks. As a prosthetic wearer moves into the swing phase of gait, the limb draws out of the socket, and the length of the leg increases functionally; this can reduce space for adequate toe clearance.

Another important factor to be considered is that upon weight bearing in stance phase, as the limb moves into the socket after pistoning, the impact on the residual limb becomes greater than it would be if the limb were "locked in." In consideration of other suspension mechanisms, suction allows the least migration of the prosthesis.



Mary Free Bed Prosthetics now has practitioners certified in two effective systems of elevated vacuum sockets the Otto Bock Harmony (mechanical pump), and the Limb Logic (electric pump).

Mark Bennet, CPO; Patrick Nimphie, CPO; and Terry Simmons, RTP, have all been trained at the Ohio Willow Wood (OWW) facility on the Limb Logic and all of our practitioners have been trained in the Otto Bock Harmony.

The American Academy for Orthotics and Prosthetics has found these devices to be advantageous to patients, and has acknowledged this by offering a certificate course on sub-atmospheric suspension (elevated vacuum).



Harmony P2 & HD

The Harmony® system controls the volume of the residual limb and prevents volume fluctuations. A total surface weight bearing socket is used instead of a specific weight bearing socket.

Harmony P-3

Less is more – the latest generation of mechanical negative pressure pumps features a lower weight, reduced structural height, and easy handling.



To receive more information about any of these elevated vacuum systems, and to determine if they are right for one of your patients, please contact us, **616.242.342** or **OandP@MaryFreeBed.com**

Prosthetic Luncheon Reviewed Computer-Powered Lower Extremity Prosthetics

Mary Free Bed Prosthetics hosted their fifth annual luncheon on Wednesday, February 23, 2011. Approximately 60 people attended to discuss indication for the use of microprocessor controlled components for lower extremity amputees, the Helix Hip Joint, and new technology for treating lower extremity amputees.

Mary Free Bed Orthotics and Prosthetics hosts lunch-n-learn events on a variety of topics throughout the year. If you would like to receive invitations to our events or more information about computer-powered lower extremity prosthetics, please contact us, **616.242.0305** or **OandP2MaryFreeBed.com**

Rehab Technology Center Welcomes Speech Language Pathologist

The Rehab Technology Center would like to introduce the newest member of their team - Melissa Hoffman, CCC-SLP. Melissa has been working as a Speech Language Pathologist with direct patient care since starting her career in 1995. Her time at Mary Free Bed Rehabilitation Hospital is split between two departments.

She is an integral part of the speech generating device (SGD) team which is comprised of a speech language pathologist and an occupational therapist. Together they complete SGD evaluations in the Rehab Technology Center for patients with a variety of ages

and diagnoses that are not able to physically speak for themselves. Through the use of assistive technology, a patient can use a device to speak aloud.

She is also serving at the ALS Clinic by addressing patients' swallowing and verbal output needs.

New Device Helps Patients Achieve Natural Gait Pattern

The first E-MAG active electronic stance control knee-ankle-foot orthoses (KAFO) was recently fit for a Michigan patient at Mary Free Bed Orthotics, helping her achieve a more natural gait pattern.

For many years she ambulated using a KAFO with drop lock knee joints. Drop lock knee joints didn't allow movement in her knee and caused her to walk with a stiff leg.

The electronic stance control KAFO now helps alleviate that problem by permitting her a more physiological heel strike, mid stance, toe off gait pattern, resulting in less stress on other areas of the body.

The E-MAG electronics contain a gyroscope for monitoring the patient's gait pattern and unlocking the knee joint to facilitate a more natural gait pattern.

The device is ideal for patients with poliomyelitis, post polio syndrome, and other diagnoses resulting in paralysis/paresis of the knee extensors.

The electronic knee joint is unlike other stance control knee joints because it has no linkage or sensors below the knee for those patients who have limited or no ankle function.

Contact us for more information, 616.242.0315 or OandP@MaryFreeBed.com

Bicycle Safety Lowers Risk of Traumatic Brain Injury

Did you know a helmet can prevent 85% of head injuries while bicycling? Safety is important for bicyclists and motorists as spring approaches. The State of Michigan has laws and ordinances in place for increased bicycling safety for

cyclists and drivers. Remember, the same laws that apply to motorists apply to cyclists. Cyclists can be ticketed and fined for not obeying traffic laws. For bicycle safety tips, please visit our website

www.MaryFreeBedOandP.com.



Clinical Bulletin is Switching to Newsletter Format

Mary Free Bed Orthotics and Prosthetics will go green by switching our clinical bulletin to an newsletter in 2011. The newsletter will be sent directly to your inbox via email six times per year and may also be viewed on our website, www.maryfreebedoandp.com. We will no longer be sending a paper version of our newsletter. If you would like to receive the newsletter, please email OandP@MaryFreeBed.com.

Mary Free Bed Orthotics & Prosthetics will go electronic starting with our O&P News Spring 2011 issue.

2 Easy Ways to Continue Reading O&P News

1. Visit us online at www.MaryFreeBedOandP.com.
2. Send us your email address and we'll send the newsletter directly to your inbox. Please send your email address information to Stephanie at Stephanie.Millis@MaryFreeBed.com, or call 616.242.0305.