Suggestions for LMN language in support of Ride Custom products.  
E2609 and E2617

Medicare not only wants to see strong justification for the specific custom components requested, but also very clear, concise, and objective ruling out of less costly options which the client is eligible for by ICD-9 only, i.e. E2607 and a E2615 back for SCI. Specific products should be mentioned:

For example:

The following products have been used/trialed without success:

Cushion #1 (name it)

1. Pressure mapping on properly fitted ________ cushion revealed highest peak pressures biased at areas of current/past skin breakdown making it unsafe for use.
2. ________ cushion was unable to correct pelvic alignment towards level and derotated.
3. ________ cushion was unable to maintain sitter’s hips to the back of the chair.
4. ________ cushion’s lack of stability failed in postural correction as described in 2 and 3 above, and lacked the stability and specificity of contour to inhibit the asymmetric pattern of spasticity and compensatory movement the client presents.

A good LMN would repeat this structure measuring the same factors on several cushions

Back support #1 (name it)

1. Even with lateral trunk supports, ________ back support lacks the specific and intimate lateral three point contact needed to reduce client’s scoliosis towards midline.
2. ________ back support lacks ability for precise adjustment of lateral orientation to bring head and neck to midline over supported residual scoliosis.
3. The contour of the ________ back support surface can not be adjusted or modified to support and stabilize client’s unique trunk shape and degree of asymmetry.
4. Overall result of trial was lack of correction and stabilization of optimal spinal alignment towards upright and midline, and absence of intimate contact to protect skin.

A good LMN would repeat this structure measuring the same factors on several backs.

Once lesser seating options are ruled out, it is time to justify the custom options using the same criteria and adding value added clinical factors as appropriate.

For example:

The lack of success with the off-the-shelf seat and backs listed above has led to the prescription of a Ride Custom Cushion and Back.

The Ride Custom Cushion (RCC100) and Ride Custom Back (RCB100) will be made from a mold of the client’s unique shape in its optimal spinal and pelvic alignment AND orientation.

1. Pressure mapping on the properly fitted RCC100 will demonstrate elimination of pressures at areas of current/past breakdown making it safe for use.
2. The firm and accurate contours of the RCC100 will enable us to correct pelvic alignment towards level and derotated.
3. The intentional application of pressure and shear at areas tolerant of these forces will help to maintain sitter’s hips to the back of the chair.
4. The overall stability and specificity of contour will inhibit the asymmetric pattern of spasticity and compensatory movement client presents.
5. Additionally, unlike other custom seating interventions, the RCC100 manages heat and moisture, and can be cleaned and sanitized to provide a healthy microenvironment.
6. The RCC100 can be adjusted and grown over time to maintain proper fit.
7. The RCC100 is accompanied by a 90 day outcomes based guaranteed fit. If outcomes are not achieved the RCC100 can be returned by the provider for full credit.

Ride Custom Back (RCB100):
1. Provides the specific and intimate lateral three point contact needed to reduce client’s scoliosis towards midline.
2. Thin profile and multi-axial hardware enables precise adjustment of lateral orientation to bring head and neck to midline over supported residual scoliosis.
3. The contour of the RCB100 is molded to support and stabilize client’s unique trunk shape.
4. Additionally, unlike other custom seating interventions, the RCB100 manages heat and moisture, and can be cleaned and sanitized to provide a healthy microenvironment.
5. The RCB100 can be adjusted and grown over time to maintain proper fit.
6. The RCB100 is accompanied by a 90 day outcomes based guaranteed fit. If outcomes are not achieved the RCB can be returned by the provider for full credit.