

## RevoFit® Reimbursement Approach:

**Justification and documentation.** These two steps are critical to successfully submit for reimbursement.

This guide is intended as a resource for practices of all sizes to clearly *Justify* and *document* your rationale for applying RevoFit® to a device. Utilizing the steps and the language gathered here will help you build the case to justify use of RevoFit® for your patients. In so doing, we aim to improve your likelihood of reimbursement through L-5999 code submissions.

Simply follow the process flow outlined below to get started. Use any or all of the provided tools and tips to support your current documentation and reimbursement process.

# A few notes:

- This guide has been assembled using the expertise of practitioners, billing/admin professionals, and independent advisors. It is intended to be a helpful resource. *However, actual documentation and reimbursement language remain the responsibility of the submitting practice/practitioner.*
- In utilizing this guide, consider this: Payers want to pay for **sufficiently justified** prosthetic solutions. Help the claim reviewer understand your request by going the extra mile to consistently document why patients clearly benefit from RevoFit® adjustability. This will result in better coding success.
- Obviously, establishing an L-code for adjustability is our long-term goal. We will achieve this goal if practices use **consistent language** in their code submissions over time. This guide is aimed at assisting you in this process.
- Lastly, Click Medical requests the help of our practice partners to collect and share documentation, reimbursement, and patient outcome results with our team. In doing so, collectively, we will generate the clinical proof we need to provide evidence-based data to CMS. Please reach out to [brian@clickmedical.co](mailto:brian@clickmedical.co) to discuss sharing some of this key data or any questions / inputs you might have.

# Document the patient's need for adjustability *throughout the entire process*:

All documentation steps are listed below, [with helpful tools, illustrative documents and FAQ's linked to key steps.](#)

Intake	Evaluate	Order	Justify	Deliver	Bill
<ul style="list-style-type: none"><li>a. Physician Referral</li><li>b. Medical Record (w/ detail)</li><li>c. Prescription (w/ detail)</li><li>d. Verify Patient Benefits / Coverage</li></ul>	<ul style="list-style-type: none"><li>a. Patient History</li><li>b. Patient reported issues/details</li><li>c. Physical/ Clinical Evaluation</li><li>d. Develop Plan of Care w/ Patient</li><li>e. Update <a href="#">Patient Chart</a></li><li>f. Verify Physician Documentation (<a href="#">FAQs</a>)</li></ul>	<ul style="list-style-type: none"><li>a. Determine Socket Requirements</li><li>b. Outline Rationale for the addition of RevoFit®</li><li>c. Update <a href="#">Patient Chart</a></li><li>d. <a href="#">DSO / DWO</a></li><li>e. Signed DSO by physician</li></ul>	<ul style="list-style-type: none"><li>a. Document expected benefits of RevoFit®</li><li>b. Update <a href="#">Patient Chart</a></li><li>c. <a href="#">Prior-authorization package</a> (if required)</li><li>d. Use consistent '99 code description. (<a href="#">FAQs</a>)</li><li>e. Download/attach:<ul style="list-style-type: none"><li>1. MSRP</li><li>2. <a href="#">Images</a></li><li>3. <a href="#">Testimonials</a></li></ul></li><li>f. Example support docs:<ul style="list-style-type: none"><li>1. <a href="#">Invoice (cfab)</a></li><li>2. <a href="#">Invoice (clinic)</a></li><li>3. <a href="#">Letter of Medical Necessity</a></li></ul></li></ul>	<ul style="list-style-type: none"><li>a. Receive approval / coverage verification from payer</li><li>b. Capture cost to deliver (internal Fab)</li><li>c. Receive final invoice (from Cfab)</li><li>d. Capture / track <a href="#">PROMs</a>, actual testimonials</li></ul>	<ul style="list-style-type: none"><li>a. Submit invoice to payer (electronic or HCFA form) (<a href="#">FAQs</a>)</li><li>b. Submit support documentation (same as prior-auth package)</li></ul>

[Click Here](#) for more Click Medical guidance regarding RevoFit Documentation and Coding

# Patient Charting – Use consistent language to improve reimbursement success.

Potential language/topics to include in patient chart are listed below:

## Evaluate

Patient Reported issues / difficulties:

- Ongoing socket adjustments
  - How long?
  - How often (per day)?
  - Describe the issues
  - What did you do?
  - What was the effect?
- Periods of inability to use the prosthesis & impact
- Weight gain/loss
- Pain
- Discomfort
- Allergies
- Difficulty donning/doffing
- Tissue irritation
- Skin breakdown
- Areas of redness that take longer than 20 mins for normal tissue coloring to return

Clinician Observed patient issues / difficulties:

- Fluctuations in residual limb volume due to:
  - Weight gain
  - Diet
  - Activity
  - Hormonal
  - Comorbidity
  - Climate
- Fit issues:
  - Pistoning
  - Rotation
  - Bulbous distal end
  - Loss of suspension
  - Instability
  - Skin/tissue irritation
  - Lack of total contact
  - Ineffective suspension
  - Donning/doffing difficulty
  - Discomfort when seated

## Order

Patient Needs / Rationale:

- Adjustability clearly solves for various conditions.
  - Current socket no longer fits.
  - Current socket broken/damaged beyond economical repair.
  - No further adjustments with existing socket would render the socket functional.
  - Current socket impedes patient activities of daily living (job, family, other)

## Justify

Expected Benefits of RevoFit®

- The proposed solution functions / meets patient needs.
- Patient will benefit from self-adjustment reducing clinic visits, socks, and daily 'downtime'.
- Activities of daily living that will be returned or improved because of self-adjustability – such as job function, family duties, hobbies, wellness/ exercise, other

# FAQs – When utilizing RevoFit®, our customers often ask...

FAQ (1): Does CM have any advice regarding referring (prescribing) physician documentation (physician notes, prescription, etc.)?

ANSWER: The referring physician relationship with the prosthetist is critical, including the rapport between their admin teams. Click recommends developing those relationships proactively to foster a willingness to provide helpful documentation *with consistent language*. Regarding RevoFit® prescribing language, it is necessary to educate referral sources on adjustable sockets as they relate to common indications and associated benefits to the patient. *Then have them prescribe the technology with language as listed below and note in the patient's medical record.*

1. Adjustable socket required so patient can self-adjust to address limb volume change
2. Adjustable socket prolongs utilization of socket
3. Adjustable socket may reduce the need for replacement sockets
4. Adjustable socket required for patient to perform ADL (Activities of Daily Living)
5. Adjustable socket reduces secondary complications resulting from poor socket fit

FAQ (2): What does CM suggest relative to submitting for prior authorization?

ANSWER: Include the RevoFit® system, coded L5999, with specific language (to be carried throughout the documentation process). *“L5999 - Addition to lower extremity, residual limb volume management, patient adjustable control system”*; For 80 Char limit, use *“L5999 - Addition to LE, residual limb volume management, patient adjustable control system”*

FAQ (3): What assets does CM provide for supporting RevoFit justification in the approval (prior auth. or other) process?

Thoroughness and consistency in the submitted package is critical - from physician notes and patient charting (evaluation through patient expected benefit of an adjustable socket) through actual 99 code language. Click also provides several useful illustrative documents (example invoice, example DSO, example prior auth package) and manufacturer provided information (photographs, MSRP, patient testimonials)

FAQ (4): Does CM have any advice regarding final invoicing package to payer?

ANSWER: Depending on the payer, providing the Click Suggested MSRP document is often helpful, as is an actual detailed invoice for the fabrication of the adjustable socket with details of parts, labor and profit (related to adding the RevoFit® system). Otherwise, the final submitted package should mirror the full set of documentation submitted with the prior authorization request.

FAQ (5): My patient is a new amputee, what justification should I make for the payer?

ANSWER: Most of the rationale for moving an existing amputee from a rigid socket to an adjustable socket apply (pre-emptively), however, the greatest justification is that a self-adjustable socket solves for known volume and shape fluctuation each new amputee experiences during the first 12-18 months post amputation, thereby reducing clinic visits, and potentially reducing socket replacement frequency during first 1-2 yrs post amputation. Additional expected benefit could be a faster return to activities of daily living through increased fit, comfort, and resulting activity level acceleration.