WillowWood® INTUY KNEE

Powered Microprocessor Knee



Reimbursement Manual

Medical Necessity Criteria, Documentation, Coding, and Claims Submission

The INTUY Knee is a motorized knee appropriate for K3** patients. INTUY Knee has established HCPCS codes, verified by PDAC. The LCD and Medical Coverage policies list specific information about documentation requirements. This manual provides details about the coding, medical necessity requirements, documentation needed, and general claims submission.

**The INTUY Knee is functionally appropriate for K2-K4 individuals. CMS LCD states K3 only for L5859

Coding for INTUY Knee

L5828 - ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING AND STANCE PHASE CONTROL

L5845 - ADDITION, ENDOSKELETAL, KNEE-SHIN SYSTEM, STANCE FLEXION FEATURE, ADJUSTABLE

L5848 - ADDITION TO ENDOSKELETAL KNEE-SHIN SYSTEM, FLUID STANCE EXTENSION, DAMPENING FEATURE, WITH OR WITHOUT ADJUSTABILITY

L5859 - ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE-SHIN SYSTEM, POWERED AND PROGRAMMABLE FLEXION/EXTENSION ASSIST CONTROL, INCLUDES ANY TYPE MOTOR(S)

L5856 - ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE-SHIN SYSTEM, MICROPROCESSOR CONTROL FEATURE, SWING AND STANCE PHASE, INCLUDES ELECTRONIC SENSOR(S), ANY TYPE

Modifiers: Use the K level and LT for left or RT for right

*Payers such as VA, DOD or Workers Comp may have coding criteria that differs from PDAC.

Medical Necessity Criteria

All lower limb prostheses require the following to be documented in the medical records:

- Patient's medical history
- Current medical condition
- Patient's desire to ambulate/use the device
- Clinical assessment of patient's functional level, with details to support the finding

Additional medical necessity requirements for the INTUY Knee include all of the following:

- microprocessor (swing and stance phase type (L5856)) controlled (electronic) knee
- K3 functional level only
- Has a documented comorbidity of the spine and/or sound limb affecting hip extension and/ or quadriceps function that impairs K-3 level function with the use of a microprocessorcontrolled knee alone
- The patient has the cognitive ability to understand the requirements of daily charging and the overall function of the knee

*Medical necessary criteria for private payers may differ from the above criteria. Be sure to check the payer's website for the most recent policies.

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Physician Documentation

A physician must evaluate the patient and provide comprehensive corroborating documentation. The following information is to be included:

- Diagnosis, date of amputation, side of amputation
- Previous prosthesis use
- History of rehab/PT
- Residual limb condition
- Cognitive, Musculoskeletal, and Neurological exam
- Details of daily movement, work tasks, household responsibilities, and recreational activities
- Chronic problems with the back/spine, such as degenerative disc disease, arthritis,or stenosis, which impact the patient's ambulation and are not resolved with an MPK or mechanical knee.

OR

Comorbidity of the sound side limb that is impacting hip extension or quadricep function

The patient is willing to learn about the use of and maintenance of the INTUY knee.

Prosthetist Documentation

- Patient's medical history, including previous prostheses
- Current medical condition
- Details of prosthetic evaluation including ROM, gait, balance
- Specific activities of daily living and mobility
- Areas of deficiency in mobility due to current prosthesis
- Patient's rehab goals
- · Patient's willingness to learn about the technology, the use, and the maintenance of the INTUY knee
- How the INTUY knee will positively impact the patient's activities







The following INTUY Knee Features and benefits information may be incorporated into your medical records, specifically when documenting how the knee will benefit the patient in daily activities.

Stumble Recovery	Holds steady in a stumble and extends to lift up preventing a fall.	
Manual Lock	App-based manual lock via the iPhone/Android app that allows complete lock of the knee.	
Inuitive Gait Progression	Ability to learn to walk naturally while using more anatomically correct muscle groups.	
Intuitive Swing Phase Control	Actively powering the flexion and extension moments during swing to help prevent toe tripping and helps reduce the patient's compensatory motions.	
Multi-Position Flexed Locking	Ability to lock the knee while loading it flexed on a variety of slopes. Relieves stress on the sound side.	
Auto Cycling Detection	The ability for the knee to recognize cycle in multiple ways without using any app. The device will provide minimal power while cycling to provide support.	
Intuitive Lifestyle	The ability to have the power to walk farther, with less fatigue on your joints. The ability to traverse all obstacles with greater efficiency; Stairs, ramps, rough terrain even sitting and standing.	
Efficient Charging	2 hr full charge on USB C and around 40 min charge for batteries above 25%. 44hr Run Time	
Regenerative Charging	INTUY is unique as when a person is using the knee for resistance when sitting, going down ramps, hills, or stairs, the knee charges itself. 13miles walked - 30% Battery drop	
Intuitive Sleep	The knee has safety and battery conservation in mind. The knee goes to sleep when it is not loaded or lying on its side. Extra fast response to wake up .5ms once loaded.	
Stairs and Chairs	The Powered assistance provides assistance in getting up from a chair, walking step over step, or climbing stairs. This reduces fall risk and stress on the sound side and spine of the user.	

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Prior Authorization

Medicare requires prior authorization for code L5856, which is included in the INTUY Knee codes. Follow the guidelines outlined on the DME MAC sites to submit for prior authorization. You will receive a response within ten business days. If the initial request is denied, you may obtain updated notes and resubmit.

FAQs

The medical necessary criteria state "has a microprocessor (swing and stance phase type (L5856)) controlled (electronic) knee." What does this mean?

The INTUY Knee has a microprocessor component within the prosthesis, as verified by PDAC. Using the HCPCS L5856 meets this criterion. You are required to do Prior Authorization with Medicare, so if they are requesting additional information you will know prior to ordering the knee.

Clinicians may choose to trial the patient with an MPK prior to using an Intuy Knee. Document the in-office trial, along with the detailed notes of the comparison of the MPK use and the Intuy Knee.

What are the comorbidities of the spine? How do they need to be documented?

It is not uncommon for people living with limb loss to experience chronic back pain or develop other conditions such as arthritis, spondylitis, spondylosis, or spondylolisthesis. Obtain documentation from a treating physician detailing the patient's condition. The notes can come from the referring physician or another physician the patient sees on a regular basis (e.g., PCP).

How much detail do I need to provide regarding the patient's daily activities?

Details about the patient's activities of daily movement will support the K-level determination. Provide as much detail as possible, including information about the time the patient is mobile, household chores, details of the work and home environment, and various terrain encountered in a day.

Is the INTUY Knee covered by all payers?

Medicare, and the majority of private payers, do consider the INTUY Knee to be medically necessary when the criteria are detailed in the documentation. There are a few private payers still classifying the INTUY Knee as Experimental and investigational (E&I). When checking the payer policies, you will see if they call out products billed with L5859 as E&I. If you have a patient with one of these coverage policies, please contact us at reimbursement@willowwood.com for assistance with appealing the E&I status.

What happens if my patient has an MPK that is only a few years old yet the Intuy Knee will better serve their needs?

According to Medicare, there is no reasonable useful lifetime for prosthetic devices. A prosthesis may be replaced when there is a physiological change in the patient, the old device is beyond repair or when there is substantial documentation outlining the current device is not meeting the patient's needs. Detail any restrictions the patient might be experiencing. Mention deficits in performing ADLs or work duties due to the current knee. Provide information about how the features of the Intuy Knee will overcome these challenges and create better mobility for the patient.

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How much is the reimbursement for the INTUY Knee?

Medicare has established allowable amounts for the HCPCS codes used to bill the INTUY Knee. Check your private payer contracts for the current fee schedule.

L-Codes	Ceiling	Floor
L5828	\$4,301.45	\$3,226.09
L5845	\$2,453.10	\$1,839.83
L5848	\$1,471.71	\$1,103.78
L5859	\$19,929.26	\$14,946.95
L5856	\$32,902.68	\$24,677.01
Total	\$61,058.20	\$45,793.66

If you need additional assistance with coding, coverage, or medical documentation for the INTUY Knee, contact us at reimbursement@willowwood.com









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