

(USE THIS AS AN EXAMPLE AND COPY TO OFFICE LETTERHEAD)

Date: _____

Patient Name: _____ Date of Birth: _____

Date of Service: _____

POST-VITRECTOMY SUPPORT DURABLE MEDICAL EQUIPMENT: HCPCS E1399

Certificate / Letter of Medical Necessity

Surgery Procedure Code: _____

Diagnosis Description: _____ ICD-10 Diagnosis Code: _____

To whom it may concern:

Following macular hole, retinal detachment, and certain diabetic surgeries, it is necessary for the patient to have their head in a face-down (prone) position for a period of one to five weeks. The position is looking down at the floor all day and lying on stomach all night. This position facilitates the proper alignment of a gas bubble to remain against the surface of the retina where it can maintain constant gentle pressure to reattach it. This is critical for the hole to seal closed and for the patient's vision to improve. Until recently, there was no equipment available commercially to assist with this position, and people had to go through very painful periods for weeks after surgery. Many of the patients are elderly and this type of recovery was a tremendous hardship for them. We now have specialized equipment available from **McFee Medical Technologies & OWL Leasing** that will assist in the positioning to ease the strain from the neck and back and making it tolerable for patients to keep their head in this very unique position. I feel the reason many of these surgeries fail is because the patient is not able to keep their head in position long enough without equipment to support the body. This equipment can be rented for roughly \$325 to \$88 per week. Hopefully this information will assist you in determining whether you would cover this medically necessary post surgical equipment.

Best regards,

Surgeon's Signature: _____

Surgeon's name (print): _____ NPI: _____

Practice Name: _____

Address: _____

Phone#: _____

FAX#: _____