



Clinical Information for C-Leg Microprocessor for Lower Limb Prosthesis

PART A: Patient/Provider Information – Please Print		
Patient Name (Last, First, MI)	Sponsor SSN	Date of Birth (mm/dd/yyyy)
Requesting Provider	Provider Fax #	

PART B: Clinical Information - Please check appropriate boxes and make comments as indicated – Please Print			
QUESTION	Yes	No	COMMENTS
1. Does the patient have sufficient cardiovascular reserve to master the higher level of technology and allow for faster than normal walking?			
2. Does the patient have the cognitive learning ability to master the higher level of technology and allow for faster than normal walking?			
3. Does the patient have the ability to walk at a faster than baseline rate using a standard prosthesis?			
4. Does the patient have the daily need for long distance (> 400 yards) walking at variable rates?			
5. Does the patient have the need for regular walking on uneven terrain or for regular use of stairs? (Note: Limited stair climbing in the home or employment environment does not require use of a C-leg.)			
6. Does the patient meet requirements for assignment of a functional level 3 or 4 as defined by Medicare (see below)?			

Additional comments:

Medicare Functional Levels

- Level 0:** Does not have the ability or potential to ambulate or transfer safely with or without assistance and prosthesis does not enhance their quality of life or mobility.
- Level 1:** Has the ability or potential to use prosthesis for transfers or ambulation on level surfaces at fixed cadence. Typical of the limited and unlimited household ambulator.
- Level 2:** Has the ability or potential for ambulation with the ability to traverse low level environmental barriers such as curbs, stairs or uneven surfaces. Typical of the limited community ambulator.
- Level 3:** Has the ability or potential for ambulation with variable cadence. Typical of the community ambulator who has the ability to traverse most environmental barriers and may have vocational, therapeutic, or exercise activity that demands prosthetic utilization beyond simple locomotion.
- Level 4:** Has the ability or potential for prosthetic ambulation that exceeds basic ambulation skills, exhibiting high impact, stress, or energy levels. Typical of the prosthetic demands of the child, active adult, or athlete.

PART C: Codes

HCPCS code(s): _____

Please fax this completed form with supporting clinical documentation and/or other relevant data to:

TriWest Healthcare Alliance – Fax: 866-269-5892

TRICARE Prime Remote, TRICARE Reserve Select – Fax: 866-312-5831

This data will be used in making a final determination.

Note: HIPAA authorization requirements do not apply to protected information used for treatment, payment, or health care operations including medical records requested for the provision of health care services.

Privacy Act Statement: This information is protected under the Privacy Act of 1974 and shall be handled as “for official use only.”

Violations of this may be punishable by fines, imprisonment, or both.