



# GoTo

## Sample Letter of Medical Necessity

Portable Postural Support Seat



Every child is unique, and every child is assessed individually to see which products are required to meet their specific individual needs. Health care providers will make the ultimate decision on which products are appropriate for an individual, based on their clinical judgement, and the funding applications will take these individual requirements into account. Firefly cannot guarantee the success in obtaining insurance funding.



## Sample Letter of Medical Necessity

**\*Please note – for sections highlighted in blue, please replace with details specific to the child’s presentation and clinical need. The text provided is for example purposes only.\***

### **Introduce yourself, highlight your relationship with the client and describe the product for which you are seeking funding.**

As Jane Doe’s therapist, I am requesting insurance funding for a Firefly GoTo Seat. This DME device has been prescribed by Jane’s physician and is a medical necessity which would not be used in the absence of disability, illness or injury. It is an essential support for performing Mobility related activities of daily living (MRADLs), such as sitting independently and feeding, all of which promote physical and cognitive development. The following explains this medical justification.

### **Explain the child’s diagnosis and disability.** *(Include ability to stand, sit, walk or transfer, and limitations in control of trunk, head or limbs resulting from the condition, diagnosis or injury.)*

Jane is a X year old boy/girl who has been diagnosed with XX.

**Strength and tone:** Jane has fluctuating tone with decreased strength in her trunk. She has some degree of passive postural control in her neck and upper trunk but very limited active and reactive control. She has limited motor control of her upper and lower limbs and is unable to use cutlery, hold a pencil, sit, stand or walk independently.

**Sensory and Comms:** She has sensory integration disorder and presents with reduced cognition. Her lack of head control makes swallowing of saliva and food difficult; and drooling more likely and more pronounced. She is non-verbal with greatly delayed communication and social skills. Jane has difficulty communicating with those around her.

**Range of Movement:** Janes has bilateral hip flexion contractures of 10 degrees and knee flexion contractures of 15 degrees. Her legs windsweep to the right and she has a flexible scoliosis.  
**Surgery and medications:** Jane has had bilateral tenotomies last year and receives Botulinum-A injections 6 monthly.

**Equipment and transfers:** Jane has a standing frame a toileting aid and a pushchair. She wears AFOs for 4-5 hours/day and is currently lifted for transfers.

Jane is unable to sit independently. This makes it difficult to partake in many of the typical activities of her peers. Jane requires constant support and frequent repositioning when sat at a regular seat. Her family find this difficult and are concerned that she could fall making family trips out rare.



**Discuss the impact of the child's diagnosis on their life. What will the implications be without a GoTo?** *(Include how the child is currently managed, and why any current equipment is no longer meeting his needs)*

**Physical development** Postural control develops from the top downwards, starting at the head. The trunk must be stable in order that head control can develop (Butler et al, 2010). A lack of head control impacts eye control such as fixing on an object and tracking it. Trunk stability is also required to develop gross motor control of the arms, and in turn, fine motor control of the hands and fingers. Jane has no head control and needs to be supported in an upright symmetrical position in order to develop gross and fine motor control and practise the full repertoire of movements required (flexion, extension and rotation) to develop head and eye control.

**Education:** Head and eye control are required to access and focus on educational resources at school impacting Jane's education. Lack of trunk and upper limb control also means she will be unable to hold and manipulate objects such as a pencil or digital device or to learn physical concepts such as heavy/light or smooth/rough. This will limit her opportunities to develop self-reliance and independence. She will be unable to sit at a table for group work with peers, thus limiting the scope of her education. The GoTo will support her trunk, accelerate her development and enable her to access the full school curriculum.

**Communication:** The GoTo can also act as a standalone seat when used with the Firefly floorsitter. At this age, learning often takes place with all children on the floor for 'circle time' and not at tables. This experience stimulates interaction and communication, such as sharing, turn-taking and talking to the group. The GoTo with floorsitter would enable her to interact at ground level with her peers and normalises typical educational experiences.

**Social:** Children need to experience a variety of situations to physically, mentally and emotionally develop. The Firefly GoTo is unique in fitting onto any standard chair and enabling Jane to partake in novel experiences in the classroom or at the shops, cafe or park. Its portability will make it easy to bring to family and friend's houses for play.

**Sensory:** Children with sensory integration issues, naturally seek increased sensory stimulation as it has a calming effect and can improve concentration. The GoTo can be used on a range of playground equipment such as swings and roundabouts providing calming rhythmic movement.

**Muscle stretch:** Children need to experience a wide variety of postures to maintain the range of movement in their muscles as their bones grow. Lack of movement leads directly to muscle shortening, contractures and deformity. The GoTo with floorsitter accessory will position Jane in a 'long-sitting' posture which stretches the hamstring and calf muscles all of which are prone to shortening due to regular sitting.

**ADL** Jane is unable to sit in a standard seat independently to partake in ADL such as feeding, playing and shopping. A standard shopping cart is unsafe as Jane may fall out or cut herself on sharp edges due to uncontrolled movements. Shopping face-to-face with an adult is a stimulating experience for children and excellent for developing Jane's communication and physical skills. With appropriate support in the shopping cart, she would be able to touch, smell, hold and even taste items while learning their names. The alternative is for the whole family to go shopping together with two adults required to push Jane in a pushchair and push the cart.








**Describe the equipment and accessories being requested.** *(Include details on adjustments for growth.)*

The Firefly GoTo Seat has been specifically developed to help children with disabilities participate in ADLs such as: learning, dining, playing, shopping, etc. It is designed and manufactured as durable medical equipment (DME) and is a registered medical device.

- The GoTo is suitable for children up to approximately 8 years old. The headrest, shoulder straps and lateral supports will support **Jane** in an upright symmetrical posture and can be adjusted to provide comfort as she grows.
- The GoTo wraparound harness is deep and comfortable. This increased sensory proprioception will reduce tone, making functional activities such as feeding and communicating easier.
- When used with the floorsitter attachment, **Jane** can play on the floor with her peers. The floorsitter can be reclined to 26 different angles, from upright for educational activities to reclined for relaxation. The angle is adjustable to promote proper swallowing during feeding as well.
- The pressure cushion distributes **Jane's** weight to protect fragile skin.
- The GoTo straps can be quickly attached to a wide variety of different seats, including swings, dining room chairs, shopping carts, trikes and many more.
- The GoTo is suitable for seats on planes.
- The GoTo is lightweight and bends flat so it can easily fit into the back of a car for travel.

**Describe the Firefly GoTo components being requested.** (Delete components as appropriate.)

The provision of the Firefly GoTo is consistent with meeting the needs of Jane's medical condition. I am requesting funding for the Firefly GoTo seat with the features and accessories outlined below.

Item	Description of Medical Necessity
<p><b>Adjustable Head Supports</b></p> 	<p>Adjustable head supports, hold the head in a functional midline position while allowing the child to turn the head left or right and flex forward.</p> <p>Options include the standard headrest for simple contoured comfort or the advanced headrest which offers more sculpted support.</p>
<p><b>Adjustable Laterals</b></p> 	<p>Adjustable laterals keep the child in a midline upright position. They can be adjusted up or down to reduce or increase support as Jane grows or her function improves. They attach to the shoulder and groin straps providing 5-point support. The shoulder straps can be loosened or removed if trunk control improves and can be easily removed for a seizure.</p>
<p><b>Optional Floorsitter</b></p> 	<p>The seat can be adjusted to 26 different recline options, from upright at 106 degrees to a fully reclined at 140° which an angle chosen to suit the activity, ability and alertness of the child that day. The seat is suitable for short naps.</p>
<p><b>Optional Pressure Cushion</b></p> 	<p>The contoured pressure cushion with viscoelastic memory foam distributes pressure to increase comfort and sitting time. The roll can increase the depth of the seat or be tucked under the seat to help release tension in hamstring muscles which are tight and short from excessive sitting.</p>
<p><b>Optional Pushchair</b></p> 	<p>The WeGo stroller has been specifically designed to accommodate the GoTo seat. With a 30kg seat capacity and large range of accessories it will serve the mobility needs of a wide range of children. The 140° enables children to have a rest or can be used as a safe clean base to change the child while in the stroller.</p>



## **Describe a scenario where the GoTo would be used and discuss the psychological benefits for the child as well as the benefits for their caregiver.**

*(Make this personal to the child and family)*

The GoTo normalises everyday activities for Jane. It will enable her to take part in group activities at nursery/school, go shopping with her mum or sit in a swing at the park. At school or when visiting relatives, Jane will be able to sit together with her friends at the same table rather than sitting separate in her mobility device. This will enable her to practice sharing and turn taking in group activities, promoting social skills and enhancing communication.

The psychological impact of participating in everyday life is immense. A systematic review of the impact of assistive technology on the family and caregivers of children with a physical disability indicated that it has a positive impact on both the children and their caregivers (Nicolson et al, 2012).

## **Discuss the cost of alternative caring methods, reiterating the benefits of the GoTo.**

*(Describe how other potential therapy methods/equipment which have been considered are not adequate. Include specific details e.g. the make and model of less expensive items and the reasons they have been rejected.)*

An alternative product is constructed from flexible textiles and does not offer the same level of stability or postural support posteriorly, anteriorly or laterally and is not suitable for children with uncontrolled movements, particularly if used off the ground. The GoTo provides improved stability both with the floorsitter or when attached to a standard dining chair.

Other alternatives require a postural insert with small rigid laterals, which are not height or depth adjustable and provide inferior lateral and anterior support. The insert is also bulky making the seat less portable than the GoTo. Unlike the GoTo, they do not allow Jane to play on the floor with her peers in a developmentally appropriate long-sitting position.

## **Summary/conclusion**

- This DME is essential for Jane to integrate into typical family life and will transform her ability to participate in ADL. It can be used in nearly any situation on nearly any seat from plane to trike, swing to shop.
- The GoTo meets the postural needs of Jane's physical condition, supporting her in an upright symmetrical posture which will allow her to develop head and trunk control, hand to eye co-ordination, spatial awareness and communication skills.
- The GoTo's ability to grow with Jane up to the age of 8 and coupling with the floorsitter will reduce the costs that would be necessary for other floor seats to be purchased.



## References

Butler PB, Saavedra S, Sofranac M, Jarvis SE, Woollacott MH. Refinement, Reliability, and Validity of the Segmental Assessment of Trunk Control. *Pediatric Physical Therapy*. 2010; 22(3):246-257. Winner of the Toby Long Award for the best manuscript published in *Paediatric Physical Therapy*, 2010

A Nicolson, L Moir & J Millsteed, 2012 Impact of assistive technology on family caregivers of children with physical disabilities: a systematic review, *Disability and Rehabilitation: Assistive Technology*, 7:5, 345-349.

**Include pictures of the activities that the GoTo can enable.**



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