

Benefit Coverage

Covered Benefit for lines of business including:
Health Benefits Exchange (HBE), Rite Care (MED), Children with Special Needs (CSN), Substitute Care (SUB)
Excluded from Coverage:
Extended Family Planning (EFP) Rhody Health Partners (RHP), Rhody Health Expansion (RHE), Medicare-Medicaid Plan (MMP) Integrity

This Clinical Medical Policy addresses coverage of Hart Walkers to improve the mobility of children with cerebral palsy and similar conditions.

Description

The MK II Hart Walker (Hart Walker) is an orthotic walking trainer which can improve the mobility of children with cerebral palsy and similar conditions. The upright posture and independent movement have also been seen to improve bone density, muscle strength, and physiologic functions although these findings have not been formally reported in peer-reviewed studies.

The suspension mechanism of the Hart Walker is adjustable to support as much of the child's weight as it necessary to hold them in an upright posture while still allowing partial weight bearing through their own legs. The bracing system maintains the children's limb and joint position in the proper alignment as they take steps, eliminating unwanted movements such as scissoring of the feet.

The base of the walker is adjustable to provide maximum stability and balance. The four-wheeled base has the potential of progressing to a two-wheeled base if the child's balance and abilities progress appropriately. Some children may progress from the two-wheeled base to walking with no base necessary. The ability to initiate a voluntary stepping motion is a key requirement for use of the Mk II Hart Walker

Coverage Determination

All Hart Walkers require prior authorization.

Criteria

Documentation of **ALL** of the following is required for prior authorization:

- Child has been referred by a Physician, Physician Assistant, or Nurse Practitioner and assessed by a physical therapist for a trial; **AND**
- It has been determined by a trial with a qualified physical therapist, that a Hart Walker would be the most appropriate and least restrictive walker/gait trainer needed to provide appropriate support for independent mobility; **AND**
- The child is at least three (3) years old; **AND**
- The child has a measurement from hip center to sole of foot of more than 15.5 inches or less than 30 inches; **AND**
- The child is able to initiate some bilateral extremity movements; **AND**

- The family is in agreement with the prescription of a Hart Walker, is motivated to use it, and is able to understand how to use the device independently of the therapist; **AND**
- The child has the cognitive ability to use the device, as assessed by the physical therapist; **AND**
- The child does not have a fracture site, skin breakdown, or has significant lower extremity contractures or other conditions which would prevent weight bearing.

Authorization Forms

Please access Prior Authorization forms by visiting Neighborhood's website at www.nhpri.org.

1. Go to the section for Providers
2. Click on "Resources & FAQ's"
3. Click on "Medical Management Request Forms"- forms are listed alphabetically by program.

[Prior Authorization Forms](#)

For assistance with prior authorizations please contact Clinical Administrative Support at 401-459-6060. Fax authorization forms to 401-459-6023.

For More information on Coding please reference the [Authorization Quick Reference Guide](#)

Exclusions

Hart walkers will not be covered if the above criteria are not met or another device has been judged to be more appropriate for the child.

CMP Cross Reference:

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Neighborhood reviews clinical medical policies on an annual base.

Disclaimer:

This medical policy is made available to you for informational purposes only. It is not a guarantee of payment or a substitute for your medical judgment in the treatment of your patients. Benefits and eligibility are determined by the member's coverage plan; a member's coverage plan will supersede the provisions of this medical policy. For information on member-specific benefits, call member services. This policy is current at the time of publication; however, medical practices, technology, and knowledge are constantly changing. Neighborhood reserves the right to review and revise this policy for any reason and at any time, with or without notice.

References:

Purins, Adrian AHTA. (01.18.10). *Hart Walker, Brief Report*. Accident Compensation Corporation.