

TO: Insurance

RE: Joy's Letter of Medical Necessity for a Boogaloo Bed

To Whom It May Concern,

I am writing on behalf of my patient, Joy Light, who requires a special needs Boogaloo Bed for her safety.

Joy's Medical Diagnoses and current data include:

- 19-years-old, 5'8 and weighs 225 pounds
- Severe autism
- Irretractable epilepsy
- Grand Mal clustering seizures
- Sensory processing disorder
- Severe global cognitive delays
- Cognitive test scores indicate that her level of functioning is in the first percentile and cognitively functioning as an 18-month-old
- Non-verbal with limited use of any functional communication
- Unable to attend an adult day program due to unsafe behaviors
- Attends a transition program for high behavioral needed support
- Assessed at a SIS Level 7 by the State of Colorado (the highest score possible due to unsafe and problematic behaviors)
- Significant self-injurious and destructive behaviors to self, property and others

Joy requires two adults with line-of-sight supervision at all times, which includes any sleep or nap time. Joy's diagnoses contribute to erratic sleeping routines. She elopes from her room every time she wakes. Joy invades her sibling's rooms by bullying through the door and turning on their lights in the middle of the night. Joy engages in self-injurious behaviors at any given moment by ripping off her toenails, slapping herself and hyperextending her joints. She engages in property destruction by throwing furniture and toys, beating on walls and counters, and breaking items within arm's reach.

Joy's erratic sleeping patterns also contribute to onset of seizures. Interrupted sleep or little sleep induce her seizure cluster activity that must be monitored 24/7.

To help stop self-injurious and destructive behaviors, and to aid in erratic sleeping patterns, **over the past 17 years Joy's team has (or is) proactively tried:**

1. Medications to induce sleep (Melatonin and Valium). Joy was groggy and unable to attend school or day program. Problematic destructive behavior increased.
2. Medications to alter behavior (Lamictal). Currently used and only prove to help with seizure activity, not problematic behaviors.

3. Daily Supplements (fish oil, Vitamin B, Vitamin D, etc.) to help regulate her internally. Does not help stabilize her behavior or sleep patterns.
4. Rotated different types of mattresses (firm, soft, padded). Made no difference in regulating sleep pattern.
5. Utilized white noise to help with the audial sensory aspect. Some calming reaction; not enough to be effective.
6. Caregivers have taped light switches shut, unplugged lamps and taken off ceiling fan ropes to stop her invasive behavior in the house.
7. Caregivers consist of two adults to help soothe during meltdowns, self-injurious behaviors and property destruction.
8. There are auditory alarms on the all the doors leading outside.
9. There are additional safety locks on the doors leading outside.
10. Currently, Joy receives 6-10 allotted hours of behavior therapy per week.

The Boogaloo Bed addresses what Joy requires to lower her threshold as a safety-risk:

1. **Prevents Joy from eloping** – A Boogaloo Bed is full size with an encapsulating enclosure that can be operated/zippered by the supervising caregiver.
2. **Prevents Joy from self-injurious behaviors and property destruction** - Enclosed space that is 100% mesh, keeping her safe from hitting the walls and/or blunt force trauma to her head.
3. **Provides a 100% sensory controlled environment to sleep and deescalate:**
 - a. **Internal video monitor controlled by an app on the phone** - provides Joy autonomy while letting caregiver attend to meal preparations, etc., for Joy.
 - b. **Alert to movement and seizures via mattress sensors** – any seizure activity or wakening will send an alert to the caregiver’s phone.
 - c. **Internal auditory component controlled by an app on the phone**– caregiver will utilize preprogrammed auditory sounds and adapted playlists to diffuse self-injurious and aggressive behaviors, all while also maintaining caregivers’ safety from a distance. This also provides Joy autonomy.
 - d. **2-way auditory component** – Joy can hear the caregiver and the caregiver can speak to Joy while remaining at a safe distance from destructive behavior.
 - e. **Internal visual component controlled by an app on the phone** - caregiver can control the lighting and/or tuning it into her circadian rhythm to diffuse self-injurious behaviors while providing Joy autonomy.
4. **100% Self-Contained Bed** - Allows Joy’s caregivers the ability to continue Joy’s housekeeping and meal needs, and/or providing rest for the caregiver. Joy’s team will have the visual monitor and auditory sounds are functioning at their fingertips and they can continue to watch her 24/7.

The Boogaloo Bed provides Joy with a controlled environment that calms, soothes, and protects her from self-injurious behaviors, seizures, elopement, property destruction, and invasive behaviors. When her elements are controlled she will be afforded the opportunity to sleep, directly impacting her ability to positively function daily.

Accompanying this Letter of Medical Necessity, you will receive Joy's Activities of Daily Living Functional Assessment, current Behavior Plan, the State of Colorado's SIS Assessment Score, and a daily log of behavioral data. All objective data supplied supports Joy's medical requirement for a Boogaloo Bed, as well as my opinion that this bed is a necessity and needs to be expedited.

Please contact me for any further questions.

Sincerely,
Doctor

Medical Equipment Applying for:

Boogaloo Bed

Address/Phone/Fax/Contact

Model #

Dimensions

Suppliers DME#