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Medicare's Wheelchair & Scooter Benefit

Medicare Part B (Medical Insurance) covers power-operated vehicles (scooters), walkers, and wheelchairs as durable medical equipment (DME). Medicare helps cover DME if:

- The doctor treating your condition submits a written order stating that you have a medical need for a wheelchair or scooter for use in your home.
- You have limited mobility and meet **all** of these conditions:
 - You have a health condition that causes significant difficulty moving around in your home.
 - You're unable to do activities of daily living (like bathing, dressing, getting in or out of a bed or chair, or using the bathroom) even with the help of a cane, crutch, or walker.
 - You're able to safely operate and get on and off the wheelchair or scooter, or have someone with you who is always available to help you safely use the device.
 - Your doctor who is treating you for the condition that requires a wheelchair or scooter and your supplier are both enrolled in Medicare.
 - You can use the equipment within your home (for example, it's not too big to fit through doorways in your home or blocked by floor surfaces or things in its path).

You pay 20% of the Medicare-approved amount after you pay your Part B deductible for the year. Medicare pays the other 80%.

If you're in a Medicare Advantage Plan (like an HMO or PPO), contact your plan to find out about costs and which DME suppliers you can use.

You must have a medical need for Medicare to cover a power wheelchair or scooter

In some areas, you may need to get your power wheelchair or scooter from specific suppliers for Medicare to pay. Visit [Medicare.gov/supplier](https://www.Medicare.gov/supplier), or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

Types of equipment

Manual wheelchair

If you can't use a cane or walker safely, but you have enough upper body strength or you have someone available to help, you may qualify for a manual wheelchair. You may have to rent the most appropriate manual wheelchair first, even if you eventually plan to buy it.

Power-operated vehicle/scooter

If you can't use a cane or walker, or can't operate a manual wheelchair, you may qualify for a power-operated scooter. To qualify, you must be able to get in and out of it safely and strong enough to sit up and safely operate the controls.

Note: If you don't need a scooter on a long-term basis, you can rent the equipment to lower your costs. Talk to your supplier to find out more about this option.

Power wheelchair

If you can't use a manual wheelchair in your home, or if you don't qualify for a power-operated scooter because you aren't strong enough to sit up or to work the scooter controls safely, you may qualify for a power wheelchair.

Note: Before you get either a power wheelchair or scooter, you must have a face-to-face exam with your doctor. The doctor will review your needs and help you decide if you can safely operate the device. If so, the doctor will submit a written order telling Medicare why you need the device and that you're able to operate it.

Prior authorization of certain equipment

You may be affected by a Medicare program called "prior authorization." Under this program, your durable medical equipment (DME) supplier will need to:

- Request "prior authorization" for certain types of power wheelchairs (listed below)
- Send the required documents to Medicare along with the request

You can choose to submit the request yourself if you get the required documents from your doctor and DME supplier. Medicare will review the information to make sure that you're eligible and meet all requirements for the item. Under this program, your Medicare coverage and benefits will stay the same and you shouldn't experience delays getting the items you need.

Prior authorization of certain equipment (continued)

At this time, these 2 types of power wheelchairs require “prior authorization” in all 50 states:

- K0856: Power wheelchair, group 3 std., single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds
- K0861: Power wheelchair, group 3 std., multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds

Your doctor or supplier must get pre-approval (prior authorization) for other types of power-operated scooters and wheelchairs if you live in one of these states: Arizona, California, Florida, Georgia, Illinois, Indiana, Kentucky, Louisiana, Maryland, Michigan, Missouri, North Carolina, New Jersey, New York, Ohio, Pennsylvania, Tennessee, Texas, or Washington.

Fraud

Most doctors, health care providers, suppliers, and private companies who work with Medicare are honest. However, there are a few who aren't. For example, some suppliers of medical equipment try to cheat Medicare by offering expensive power wheelchairs and scooters to people who don't qualify for these items. Some dishonest providers or suppliers bill Medicare for a more expensive power wheelchair and deliver a cheaper scooter. Ask questions before you get a scooter or a wheelchair—you have a right to know everything about your medical care, including costs to Medicare.

Also, some suppliers of medical equipment may call you without your permission, even though “cold calling” isn't allowed. Help protect you and your family from fraud—never give out your Medicare number, your Social Security Number, or your bank account or credit card information to anyone over the phone. This information can be used to bill Medicare for supplies you may never get. Remember, Medicare will never call you and ask for personal information.

Fraud (continued)

How to spot fraud & abuse

You can help Medicare stop fraud and abuse by watching for these examples of possible Medicare fraud and taking the appropriate action:

- Record dates of doctor's appointments and equipment you get.
- Review your "Medicare Summary Notices" (MSNs) for payment of claims for equipment you never got or no longer have in your home.
- Signs of fraud and abuse are a supplier's offer to:
 - Give you a "free" wheelchair or scooter.
 - Pay you cash or to waive your copayment.
 - Have a doctor you don't know order a wheelchair or scooter for you.

What to do if you suspect fraud & abuse

If you suspect that Medicare is being charged for a service or supply you didn't get, or you don't know the supplier or ordering doctor on the claim, call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

For more information

Medicare is here for you 24 hours a day, every day. To get more information, visit [Medicare.gov](https://www.medicare.gov), or call 1-800-MEDICARE. For more information about Medicare's fraud and abuse activities, visit [Medicare.gov/fraud](https://www.medicare.gov/fraud).

You have the right to get Medicare information in an accessible format, like large print, Braille, or audio. You also have the right to file a complaint if you feel you've been discriminated against. Visit <https://www.cms.gov/about-cms/agency-Information/aboutwebsite/cmsnondiscriminationnotice.html>, or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

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