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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.

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 need "prior authorization" for certain types of equipment. If so, your durable medical equipment (DME) supplier will need to:

- Request "prior authorization" for certain types of power wheelchairs (listed on pages 3–4)
- Send the required documents to Medicare along with the request

You can 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.

Power wheelchairs that require prior authorization

These power wheelchairs require “prior authorization” before Medicare will pay for them:

Power wheelchair (sling/solid seat/back)			
Model	Group	Type	Weight capacity (up to and including pounds)
K0813	1 standard	Sling/solid seat/back	300
K0815	1 standard	Sling/solid seat/back	300
K0820	2 standard	Sling/solid seat/back	300
K0822	2 standard	Sling/solid seat/back	300
K0824	2 heavy duty	Sling/solid seat/back	301 to 450
K0826	2 very heavy duty	Sling/solid seat/back	451 to 600
K0828	2 extra heavy duty	Sling/solid seat/back	601 or more
K0835	2 standard	Sling/solid seat/back	300
K0837	2 heavy duty	Sling/solid seat/back	301 to 450
K0839	2 very heavy duty	Sling/solid seat/back	451 to 600
K0840	2 extra heavy duty	Sling/solid seat/back	601 or more
K0841	2 standard	Sling/solid seat/back	300
K0843	2 heavy duty	Sling/solid seat/ back	301 to 450
K0848	3 standard	Sling/solid seat/back	300
K0850	3 heavy duty	Sling/solid seat/back	301 to 450
K0852	3 very heavy duty	Sling/solid seat/back	451 to 600
K0854	3 extra heavy duty	Sling/solid seat/back	601 or more
K0856	3 standard	Sling/solid seat/back	300
K0858	3 heavy duty	Sling/solid seat/back	301 to 450
K0860	3 very heavy duty	Sling/solid seat/back	451 to 600
K0861	3 standard	Sling/solid seat/back	300
K0862	3 heavy duty	Sling/solid seat/back	301 to 450
K0863	3 very heavy duty	Sling/solid seat/back	451 to 600
K0864	3 extra heavy duty	Sling/solid seat/back	601 or more

Power wheelchairs that require prior authorization (continued)

Power wheelchair (captains chair)			
Model	Group	Type	Weight capacity (up to and including pounds)
K0814	1 standard	Portable	300
K0816	2 standard	Not portable	300
K0821	2 standard	Portable	300
K0823	2 standard	Not portable	300
K0825	2 heavy duty	Not portable	301 to 600
K0827	2 very heavy duty	Not portable	451 to 600
K0829	2 extra heavy duty	Not portable	601 or more
K0836	2 standard	Not portable	300
K0838	2 heavy duty	Not portable	301 to 450
K0842	2 standard	Not portable	300
K0849	3 standard	Not portable	300
K0851	3 heavy duty	Not portable	301 to 450
K0853	3 very heavy duty	Not portable	451 to 600
K0855	3 extra heavy duty	Not portable	601 or more
K0857	3 standard	Not portable	300
K0859	3 heavy duty	Not portable	301 to 450

For more information on power mobility devices visit [Medicare.gov/coverage/wheelchairs-scooters](https://www.Medicare.gov/coverage/wheelchairs-scooters).

How will I know if the prior authorization request is approved?

Medicare will send a decision letter to your power wheelchair supplier. You may contact your power wheelchair supplier about the decision, or call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048. Also, your power wheelchair supplier may send you a decision letter.

Why was my request denied?

Your prior authorization request may be denied if:

- Medicare finds you don't medically require a power wheelchair.
- Medicare doesn't get all the information needed to make a decision. If more information is needed, your DME supplier may resubmit your authorization request.

What do I do if I suspect fraud?

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 waive your copayment.
- Have a doctor you don't know order a wheelchair or scooter for you.

For more information, visit [Medicare.gov](https://www.Medicare.gov) or call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048. If you want to report possible fraud, visit [Medicare.gov/forms-help-resources/help-fight-medicare-fraud/how-report-medicare-fraud](https://www.Medicare.gov/forms-help-resources/help-fight-medicare-fraud/how-report-medicare-fraud), or call 1-800-MEDICARE.

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 [Medicare.gov/about-us/accessibility-nondiscrimination-notice](https://www.medicare.gov/about-us/accessibility-nondiscrimination-notice), or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

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