

**Medicare Coverage and Payment rules
Power (Motorized) Wheelchair**

A power wheelchair is covered when all of the following criteria are met:

1. The patient's condition is such that without the use of a wheelchair the patient would otherwise be bed or chair confined and;
2. The patient's condition is such that the wheelchair is medically necessary and the patient is unable to operate a wheelchair manually and;
3. The patient is capable of safely operating the controls for the power wheelchair.

A patient who requires a power wheelchair usually is totally non-ambulatory and has severe weakness of the upper extremities due to a neurological or muscular disease/condition.

A power wheelchair is covered if the patient's condition is such that the requirement for a power wheelchair is long term (at least six months).

Options that are beneficial primarily in allowing the patient to perform leisure or recreational activities are not covered.

**Medicare Coverage and Payment Rules
Power Operated Vehicle (Scooter)**

A power operated vehicle is covered when all of the following criteria are met:

1. The patient's condition is such that a power-operated vehicle is required for the patient to get around the home, and;
2. The patient is unable to operate a manual wheelchair;
3. The patient is capable of operating the controls for the power-operated vehicle, and;
4. The patient can transfer safely in and out of the power-operated vehicle, and has adequate trunk stability to be able to safely ride in the power operated vehicle

A power-operated vehicle is usually covered only if a physician who is in one of the following specialties orders it: Physical Medicine, Orthopedic Surgery, Neurology, or Rheumatology.

Power-operated vehicles will be denied as medically necessary for patients who can ambulate in the home but require a power-operated vehicle for recreational activities only.