

Check List for Manual Wheelchair Documentation

- Medical Records include documentation of a face-to-face encounter between the beneficiary and the ordering practitioner that occurred within 6 months prior to completion of the order
- The records document that all of the following BASIC CRITERIA have been met:
 - The beneficiary has a mobility limitation that SIGNIFICANTLY impairs the ability to participate in one or more mobility-related activities of daily living (MRADL's) such as toileting, feeding, dressing, grooming and bathing in customary locations in the home; **AND**
 - The mobility limitation cannot be sufficiently resolved by the use of an appropriately fitted CANE OR WALKER (both need to be mentioned); **AND**
 - Use of a manual wheelchair will significantly improve the beneficiary's ability to participate in MRADLs and the beneficiary will use it on a regular basis IN THE HOME; **AND**
 - The beneficiary has not expressed an unwillingness to use the manual wheelchair that is provided in the home; **AND**
 - The beneficiary has sufficient upper extremity function and other physical and mental capabilities needed to safely self-propel the manual wheelchair that is provided in the home during a typical day OR the beneficiary has a caregiver who is available, willing and able to provide assistance with the wheelchair.

NOTE: Limitations of strength, endurance, range of motion, or coordination, presence of pain, or deformity or absence of one or both upper extremities are relevant to the assessment of upper extremity function.

- Weight and/or height (if needed to support the medical necessity of the item(s) ordered)
- Medical record is SIGNED (either electronically (preferred) or hand signed with date and printed clearly the providers name under the signature.
- Include order form completed by provider

NOTE:

For K0003 – Lightweight Wheelchair – in addition to above, you MUST SPECIFY in clinical note: You are ordering a lightweight wheelchair and why. i.e. – no sufficient arm strength to self-propel a standard wheelchair etc.

For K0004 – High Strength Lightweight Wheelchair – in addition to above, you MUST SPECIFY in clinical note: The beneficiary self-propels the wheelchair while engaging in frequent activities in the home that cannot be performed in a standard or lightweight wheelchair.

For K0006/K0007 – Heavy Duty Wheelchair – in addition to above, you MUST SPECIFY in clinical note: The beneficiary is >250 or >300 lbs and will require a heavy duty chair to accommodate them.