



MEDICAL ASSISTANCE BULLETIN
COMMONWEALTH OF PENNSYLVANIA * DEPARTMENT OF PUBLIC WELFARE

SUBJECT

Clarification of Coverage for Motorized Wheelchairs and Other Motorized Durable Medical Equipment (DME)

BY

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PURPOSE:

The purpose of this bulletin is to provide clarification of the phrase "unable to ambulate" when applied as a condition for coverage for motorized wheelchairs and other motorized DME in the Medical Assistance (MA) Program.

SCOPE:

This bulletin applies to all physicians, medical suppliers, pharmacies, certified registered nurse practitioners, and physical therapists enrolled in the MA Program, and to all managed care organizations under contract with the Department.

BACKGROUND:

MA Bulletin 01-87-08, 05-87-02, 19-87-06, issued on July 30, 1987, sets forth the criteria for coverage for motorized wheelchairs prescribed for categorically needy recipients residing in the home and for use in the community. As advancements have been made in the field of DME and additional motorized equipment have been added to the MA Program Fee Schedule, the Department has used the criteria and procedures in this bulletin when reviewing requests for such equipment.

In order to ensure that the prescribed motorized wheelchair and other motorized DME is medically necessary and appropriate for the recipient, the chair must be prior authorized by the Department in the Fee-for-Service delivery system or the recipient's managed care organization (MCO) in the managed care delivery system. All of the criteria listed in MA Bulletin 01-87-08, 05-87-02, 19-87-06 (copy attached) must be met and so certified to the Department or the MCO in accordance with the procedures established by the Department or the MCO.

DISCUSSION:

Recently, the Department received several requests for clarification of the phrase "unable to ambulate" when applied as one of the criteria for coverage of motorized wheelchairs or other DME.

For MA purposes, "unable to ambulate" refers to a condition in which the individual lacks functional ambulation. Functional ambulation means the ability to walk so as to engage in day-to-day domestic, vocational and social activities. The assessment of functional ambulation requires an evaluation of whether a recipient is able to walk the distances necessary to complete the individual's activities of daily living, in each of the environments the individual would routinely encounter in the course of those activities. The individual must be able to walk the necessary distances safely, independently and in a reasonable period of time. An individual may be determined to be functionally ambulatory if these conditions are met using a manual assistive device such as a cane or walker or using behavioral strategies. The ability to functionally ambulate is specific to the setting or environment encountered, and an individual might reasonably be determined to have functional ambulation in some settings and not in others. To

the extent that a recipient lacks functional ambulation in a setting which the recipient would be expected to routinely encounter, that individual is "unable to ambulate."

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

The appropriate toll-free number for your provider type.

Visit the Office of Medical Assistance Programs website at www.dpw.state.pa.us/omap.

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