

Policy References: [Local Coverage Determination Power Mobility Devices \(L33789\) and Policy Article \(A52498\)](#)

Documentation References: [Standard Documentation Requirements Policy Article \(PA\) A55426](#)

The treating clinician must complete the following items:

- [Conduct and document a Face-to-Face Evaluation \(FTF\)](#)
- [Standard Written Order \(SWO\)](#)
- Medical record documentation requirements (see below)

Medical Documentation

- General coverage criteria for a Power Mobility Device have been met.
- Beneficiary is able to safely transfer to and from a Power Operated Vehicle (POV); and operate the tiller steering system; and maintain postural stability and position while operating the POV in the home.
- Beneficiary's mental capabilities (e.g., cognition, judgment) and physical capabilities (e.g., vision) are sufficient for safe mobility using a POV in the home.
- Use of a POV will significantly improve beneficiary's ability to participate in MRADLs and beneficiary will use it in the home.
- Beneficiary has not expressed an unwillingness to use a POV in the home.

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