

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; **and**
- The beneficiary has been self-propelling in a manual wheelchair for at least 1 year; **and**
- The beneficiary has had a specialty evaluation that was performed by a licensed/certified medical professional, such as a PT or OT, or practitioner who has specific training and experience in rehabilitation wheelchair evaluations and that documents the need for the device in the beneficiary's home. The PT, OT, or practitioner may have no financial relationship with the supplier.

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