



For complete information on Power Mobility Device (PMD) Documentation, visit www.invacare.com

For your patient's power wheelchair or scooter to be funded, you must provide the following two documents:

1. A **Face-To-Face Mobility Exam Report**
2. A **Written Order** for the Power Wheelchair

The power wheelchair supplier must receive both documents within 45 days of the face-to-face mobility examination.

*The supplier will then determine the appropriate power mobility device for the patient. You must sign and date this **Detailed Product Description** before the supplier can order the PMD.*

Note: This information is not medical advice. The physician and other medical care providers are responsible for determining proper product selection and the appropriate billing codes when submitting claims. Please consult an attorney or other billing advisor as needed to discuss specific care situations in further detail.

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PRESCRIBING CONSUMER POWER MOBILITY DEVICES

Clinician's Quick Reference Guide

Getting your patients the **necessary equipment** in a **timely manner**



Yes, you can.®

Face-To-Face Exam Report Checklist

The Face-To-Face Exam Report should be a detailed narrative in the patient's chart notes detailing the mobility examination. The Face-To-Face Exam Report must address the following questions:

- ☐ **What is the patient's mobility limitation and how does it interfere with activities of daily living, such as bathing, dressing, grooming, eating and getting to the bathroom?**
- ☒ **Include info such as:** Patient symptoms; Related diagnoses; How long the condition has been present; Clinical progression; Interventions that have been tried; Presence of abnormal tone or deformity of arms, legs, and trunk; Neck, trunk and pelvic posture and flexibility; Sitting and standing balance; etc.
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- ☐ **Why can't a cane, walker, or manual wheel chair meet the patient's mobility needs in the home?**
- ☒ **Include info such as:** Impairment of strength, range of motion, sensation, or coordination of arms and legs; Past use of cane or walker; Past use of manual wheelchair; etc.
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- ☐ **If prescribing a power wheelchair: Why can't a scooter meet the patient's mobility needs in the home?**
- ☒ **Include info such as:** Physical limitations preventing safe transfer into and out of the scooter or operation of the tiller steering system; Lack of postural stability requiring more supportive seating, etc.
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- ☐ **Does the patient have the physical and mental capabilities to operate a power wheelchair or scooter in the home?**

Written Order Checklist

After completing the Face-To-Face exam, a Written Order for the power wheelchair must be provided. The Written Order must include all of the following elements:

- ☐ Beneficiary's name
- ☐ Description of the item (i.e. power chair) ordered
- ☐ Date of the Face-To-Face exam
- ☐ Pertinent diagnoses/conditions that relate to the need for the power wheelchair
- ☐ Length of need for the power wheelchair
- ☐ Physician's signature
- ☐ Date of physician's signature