



## Medicare's Wheelchair and Scooter Benefit

This fact sheet explains Medicare coverage for wheelchairs and scooters. For Medicare to cover any of the wheelchairs and scooters listed below, your doctor must state that you need this equipment because of your medical condition. Medicare will pay 80% of the Medicare-approved amount, after you've met the Part B deductible. You pay 20% of the Medicare-approved amount.

For you to be eligible for any device known as “mobility assistive equipment” (MAE) (cane, crutches, walkers, manual wheelchair, power wheelchair, scooter), the item(s) must be needed in your home.

To get MAE, you must meet the following requirements:

- Have a health condition where you need help with activities of daily living like bathing, dressing, getting in or out of the bed or chair, moving around, or using the bathroom
- Be able to safely operate and get on and off the wheelchair or scooter
- Have good vision
- Be mentally able to safely use a scooter, or have someone with you who can make sure the device is used correctly and safely

The equipment also must be useful within the physical layout of your home (it must not be too big for your home or blocked by things in its path).

### Manual Wheelchair

You may need a manual wheelchair if you can't use a cane or walker safely. The wheelchair can't be a high strength, ultra-lightweight wheelchair that you can buy without renting it first.

### Rolling Chair/Geri-chair

You may need a rolling chair if you need more support than a wheelchair can give. These chairs have small wheels, that must be at least 5 inches in diameter. The rolling chair must be designed to meet your needs due to illness or other impairment.



## Power-Operated Vehicle/Scooter

You may need a power-operated scooter if you can't use a cane or walker or operate a manual wheelchair.

## Power Wheelchair

You may need a motorized wheelchair if you can't use a manual wheelchair in your home, or if you don't qualify for a power-operated scooter because you aren't strong enough to sit up or to work the scooter controls safely in your home.

**Before you get either a power wheelchair or scooter, you must meet with a doctor who can explain to Medicare (in the form of an order) why you need the device. The doctor also must be able to tell Medicare that you can operate it safely.**

Remember, you must have a medical need for Medicare to cover a power wheelchair or scooter. Medicare won't cover this equipment if it will be used mainly for leisure or recreational activities, or if it's only needed to move around outside your home.

**Note:** You have the choice of either renting or buying a power wheelchair or scooter. If you don't need a power wheelchair or scooter on a long-term basis, you may want to rent the equipment to reduce your out-of-pocket costs. Talk to your supplier to find out more about this option.

## Fraud

Most doctors, health care providers, suppliers, and private companies who work with Medicare are honest. However, there are a few who aren't. For example, some suppliers of medical equipment try to cheat the Medicare Program by offering power wheelchairs and scooters (also known as Power-Operated Vehicles) to people who don't qualify for these items under Medicare. Medicare is trying harder than ever to find and prevent fraud and abuse by working more closely with health care providers, strengthening oversight, and launching a national program to review claims.

## How to Spot Fraud and Abuse

The following are examples of possible Medicare fraud:

- Suppliers offer you a free wheelchair or scooter
- Suppliers offer to waive your copayment
- Someone bills Medicare for equipment you never got
- Someone bills Medicare for home medical equipment after it has been returned



## **What to Do if You Suspect Fraud and Abuse**

If you suspect billing fraud, contact your health care provider to be sure the bill is correct. If your doctor, health care provider, or supplier doesn't help you with your questions or concerns or if you can't contact them, you can do any of the following and explain the issue:

1. Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
2. Write a letter to Medicare. Mail it to: Beneficiary Contact Center, PO Box 39, Lawrence, KS 66044.
3. Write a letter to the Department of Health and Human Services (HHS). Mail it to: HHS Tips Hotline, PO Box 23489, Washington, DC 20026-3489.
4. Call the HHS Office of Inspector General Hotline at 1-800-HHS-TIPS (1-800-447-8477). TTY users should call 1-800-377-4950.
5. Send an e-mail to the HHS Office of Inspector General at [hhstips@oig.hhs.gov](mailto:hhstips@oig.hhs.gov).

## **For More Information**

Medicare is here for you 24 hours a day, every day. To get more information, visit [www.medicare.gov](http://www.medicare.gov) or call 1-800-MEDICARE.