

Physician instructions for Lift Chairs

Dear Physician,

In order for a patient to qualify for a Seat Lift Mechanism, they must:

- meet the medical coverage criteria established by Medicare (see A. below) and
- specific documentation requirements must be completed by the Physician (see B. below)

Just FYI, if all medical criteria are documented correctly, an Rx and CMN are completed and all delivery paperwork is compliant, the patient MAY receive reimbursement in the range of \$210-\$275. They are still financially responsible for the remainder of the chair which is typically \$450-\$1500. A courtesy claim to Medicare will be submitted but there is no guaranty of payment.

A. For a Seat Lift Mechanism to be covered under insurance policy, all of the following medical criteria must be met:

1. The patient must have severe arthritis of the hip or knee or have a severe neuromuscular disease.
2. The seat lift mechanism must be part of the physician's course of treatment and be prescribed to effect improvement, or arrest or retard deterioration in the patient's condition.
3. The patient must be completely incapable of standing up from a regular armchair or any chair in their home. (The fact that a patient has difficulty or is even incapable of getting up from a chair, particularly a low chair, is not sufficient justification for a seat lift mechanism. Almost all patients who are capable of ambulating can get out of an ordinary chair if the seat height is appropriate and the chair has arms.)
4. Once standing, the patient must have the ability to ambulate. Coverage of seat lift mechanisms is limited to those types which operate smoothly, can be controlled by the patient, and effectively assist a patient in standing up and sitting down without other assistance.
5. The physician ordering the seat lift mechanism must be the treating physician or a consulting physician for the disease or condition resulting in the need for a seat lift. The physician's record

must document that all appropriate therapeutic modalities (e.g., medication, physical therapy) have been tried and failed to enable the patient to transfer from a chair to a standing position.

B. Documentation Needed for a Seat Lift Mechanism: Insurance requires the following:

- Documented Face to Face Visit in regards to the need for a Seat Lift Mechanism, including the above criteria listed in A.
- Written Order Prior to Delivery (WOPD)
- Certificate of Medical Necessity (CMN) for a Seat Lift Mechanism • A copy of the treating physician's records indicating all therapeutic modalities (e.g., physical therapy, medications...) have been tried and failed.

-The treating physician must have an in-person examination with the beneficiary within the six (6) months prior to the date of the WOPD. This examination must document that the beneficiary was evaluated and/or treated for a condition that supports the need for the item(s) of DME ordered.

The WOPD (Rx) must have the following information: • Beneficiary's full name • Physician's Name • Date of the order and the start date, if start date is different from the date of the order. • Detailed description of the item needed. May be narrative description or brand name/model number. • The physician's signature and signature date. Signature and date stamps are not allowed. To ensure that an item is still medically necessary, the delivery date/date of service must be within three months from the "Initial Date" of the CMN or three months from the date of the physician's signature. Patient medical records may include but are not limited to the physician's office records, hospital records, nursing home records, test reports, physical therapy progress notes or records from other healthcare professionals. These records should describe the patient's functional capabilities and limitations, the therapeutic modalities that were tried and failed and the physician's plan of treatment.