Medicare Part B (Medical Insurance) covers power-operated vehicles (scooters), walkers, and wheelchairs as durable medical equipment (DME). Medicare helps cover DME if:

- The doctor treating your condition submits a written order stating that you have a medical need for a wheelchair or scooter for use in your home.
- You have limited mobility and meet all of these conditions:
  - You have a health condition that causes significant difficulty moving around in your home.
  - You’re unable to do activities of daily living (like bathing, dressing, getting in or out of a bed or chair, or using the bathroom), even with the help of a cane, crutch, or walker.
  - You’re able to safely operate and get on and off the wheelchair or scooter, or have someone with you who’s always available to help you safely use the device.
  - Your doctor who’s treating you for the condition that requires a wheelchair or scooter and your supplier are both enrolled in Medicare.
  - The equipment must be usable within your home (for example, it’s not too big to fit through doorways in your home or blocked by floor surfaces or things in its path.)

Generally, Medicare will pay 80% of the Medicare-approved amount, after you’ve met the Part B deductible. You’ll pay 20% of the Medicare-approved amount.

If you’re in a Medicare Advantage Plan (like an HMO or PPO), you must contact your plan to find out about costs and which DME suppliers you can use.

**Types of equipment**

**Manual wheelchair**

If you can’t use a cane or walker safely, but you have enough upper body strength or have a caregiver who’s available to help, you may qualify for a manual wheelchair. The most appropriate manual wheelchair for you may have to be rented first, even if you eventually plan to buy it.
Types of equipment (continued)

Power-operated vehicle/scooter

If you can’t use a cane or walker, or can’t operate a manual wheelchair, you may qualify for a power-operated scooter, if you can safely get in and out of it and are strong enough to sit up and safely operate the controls.

Note: If you don’t need a scooter on a long-term basis, you can rent the equipment to lower your costs. Talk to your supplier to find out more about this option.

Power 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, you may qualify for a power wheelchair.

Note: Before you get either a power wheelchair or scooter, you must have a face-to-face exam by your doctor. The doctor will review your needs and help you decide if you can safely operate the device. If so, the doctor will submit a written order telling Medicare why you need the device and that you’re able to operate it.

Tips

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

In some areas, you may need to get your power wheelchair or scooter from specific suppliers for Medicare to pay. Visit Medicare.gov/supplier, or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users should call 1-877-486-2048.

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 Medicare by offering expensive power wheelchairs and scooters to people who don’t qualify for these items. Some dishonest providers or suppliers bill Medicare for a more expensive power wheelchair and deliver a cheaper scooter. Ask questions before you get a scooter or a wheelchair – you have a right to know everything about your medical care, including costs to Medicare.

Also, some suppliers of medical equipment may call you without your permission, even though “cold calling” isn’t allowed. Help protect you and your family from fraud by never giving out your Medicare number, your Social Security Number, or your bank account or credit card information to anyone over the phone. This information can be used to bill Medicare for supplies you may never get. Remember, Medicare will never call you and ask for personal information.
Fraud (continued)

Note: If you live in one of the 7 states with high rates of Medicare fraud (California, Texas, Florida, Michigan, Illinois, North Carolina, and New York), your doctor or supplier must get pre-approval (prior authorization) for your power-operated scooter or wheelchair ordered on or after September 1, 2012—August 31, 2015.

How to spot fraud & abuse

You can help Medicare stop fraud and abuse by watching for these examples of possible Medicare fraud and taking the appropriate action:

- Record dates of doctor's appointments and equipment you get.
- Review your “Medicare Summary Notices” (MSNs) for payment of claims for equipment you never got or no longer have in your home.
- Refuse a supplier’s offer to:
  - Give you a “free” wheelchair or scooter.
  - Pay you cash or to waive your copayment.
  - Have a doctor you don’t know order a wheelchair or scooter for you.

What to do if you suspect fraud & abuse

If you suspect that Medicare is being charged for a service or supply you didn’t get, or you don’t know the supplier or ordering doctor on the claim, call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

For more information

Medicare is here for you 24 hours a day, every day. To get more information, visit Medicare.gov, or call 1-800-MEDICARE. For more information about Medicare's fraud and abuse activities, visit stopmedicarefraud.gov.