



WALKER

Specific Criteria for Standard Walker

THE FOLLOWING MUST BE NARRATED IN THE PATIENT'S CHART NOTES

A **standard walker (E0130, E0135, E0141, E0143)** and related accessories are covered if all of the following criteria (1-3) are met:

1. The beneficiary has a mobility limitation that significantly impairs his/her ability to participate in one or more mobility-related activities of daily living (MRADL) in the home.
 - a. Prevents the beneficiary from accomplishing the MRADL entirely, OR
 - b. Places the beneficiary at reasonably determined heightened risk of morbidity or mortality secondary to the attempts to perform the MRADL, OR
 - c. Prevents the beneficiary from completing the MRADL within a reasonable time frame; AND
2. The beneficiary is able to safely use the walker; AND
3. The functional mobility deficit can be sufficiently resolved with use of a walker.

If all of the criteria are not met, the walker will be denied as not reasonable and necessary.

A **heavy duty walker (E0148, E0149)** is covered for beneficiaries who meet coverage criteria for a standard walker and who weigh more than 300 pounds. If an E0148 or E0149 walker is provided and if the beneficiary weighs 300 pounds or less, it will be denied as not reasonable and necessary.

A **heavy duty, multiple braking system, variable wheel resistance walker (also referred to as a U-Step Walker - E0147)** is covered for beneficiaries who meet coverage criteria for a standard walker and who are unable to use a standard walker due to a severe neurologic disorder or other condition causing the restricted use of one hand. Obesity, by itself, is not a sufficient reason for an E0147 walker. If an E0147 walker is provided and if the additional coverage criteria are not met, it will be denied as not reasonable and necessary.