

Ambulatory Aids

Documentation Requirements

Walkers/Canes/Crutches - All insurances

- ★ Ambulatory Aids Prescription
- ★ Medical records (see below for criteria)

Knee Scooters

- ★ Medicaid Certificate of Medical Necessity
- ★ Non-Medicaid payors Ambulatory Aids Prescription
- ★ Medical records (see below for criteria)

Medical Record Requirements

*	Face to face visit with treating practitioner. Additional clinician notes (PT, OT, etc.) can support medical
	necessity, but cannot replace the face-to-face visit. Records must support:
	☐ The patient has a mobility limitation that impacts their activities of daily living.
	Examples of MRADLs – Toileting, bathing, grooming, cooking.
	For Medicare, MRADLs must be within the home.
	☐ The mobility limitation does one of the following:
	 Prevents the patient from accomplishing MRADLs entirely.
	 Prevents the patient from accomplishing MRADLs within a reasonable time frame.
	 Puts the patient at higher risk for injury or death secondary to completing MRADLs.
	☐ The patient can safely use the item and the ambulatory aid will resolve the mobility limitation.
	☐ For heavy duty walkers, the medical record must have a documented weight above 300 lbs. within
	the last 30 days.
*	For Medicaid, this visit must take place within 6 months of the order.