

Reference: L11461, A35427 (prior to 10/01/2015); L33791, A52503 (on/after 10/01/2015)

All Walkers

- Dispensing Order, if applicable
- Detailed Written Order (DWO)
- Beneficiary Authorization
- Proof of Delivery (POD)
 - Method 1 - Direct Delivery to the Beneficiary by the Supplier
The date the beneficiary/designee signs for the supplies is to be the date of service of the claim.
 - Method 2 - Delivery via Shipping or Delivery Service
The shipping date is to be the date of service of the claim.
- Continued Need
- Continued Use

Medical Records

- Medical records document the following:
 - The beneficiary has mobility limitation that significantly impairs ability to participate in one or more mobility-related activities of daily living (MRADL) in the home. A mobility limitation is one that:
 - Prevents the beneficiary from accomplishing the MRADL entirely, **or**
 - Places the beneficiary at reasonably determined heightened risk of morbidity or mortality secondary to the attempts to perform the MRADL, **or**
 - Prevents the beneficiary from completing the MRADL within a reasonable timeframe; **and**
 - The beneficiary is able to safely use the walker; **and**
 - The functional mobility deficit can be sufficiently resolved by use of a walker.

Heavy Duty Walker (E0148, E0149)

- The beneficiary weighs more than 300 pounds.

Heavy Duty, Multiple Braking System, Variable Wheel Resistance Walker (E0147)

- Medical records document the beneficiary is unable to use a standard walker due to a severe neurologic disorder or other condition causing the restricted use of one hand.

Walker with Trunk Support (E0140) and Walker with an Enclosed Frame (E0144)

- Medical necessity for these items have not been established. Therefore, if they are provided, they will be denied as not reasonable and necessary.

Leg Extensions (E0158)

- The beneficiary is six feet tall or taller.

Billing Reminders

- Add KX modifier to claims for heavy duty walkers (E0148, E0149) if you have documentation in your records that the beneficiary's weight (within 1 month of providing the walker) was greater than 300 pounds.
- When there is an expectation of a medical necessity denial, the GA modifier must be added to the code if a valid ABN has been obtained or a GZ modifier if a valid ABN has not been obtained.
- Append the GY modifier to the HCPCS code(s) if the walker and accessories are only needed for mobility outside the home
- All claims for HCPCS codes E0147 and E1399 must include:
 - Manufacturer's name
 - Model name/number
- The only walkers that may be billed with code E0147 are those for which a written Coding Verification Review has been made by the PDAC contractor and subsequently published on the appropriate Product Classification List.

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