



Complex Rehab & Mobility Services

301 Rushing Drive | Herrin, IL 62948 | P: 618.998.9250 | F: 618.997.1385

## HOW DO I ORDER POWER MOBILITY?

1. Have a face-to-face examination with your patient; reason for visit must be to discuss mobility issues IN THE HOME.  
(Most insurance companies will not cover power mobility for outside use only)
2. Address the following topics during the face-to-face appointment; documented in normal chart format:
  - a. History and physical including past and present medical conditions that are relevant to the patient's mobility needs
  - b. Document patient's symptoms that are caused by the condition, which limit ambulation as well as the ability to propel an **optimally configured manual wheelchair**.
  - c. Indicate what MRADLs (Mobility Related Activities of Daily Living) are affected by their mobility limitation.
    - i. Toileting, feeding, dressing, grooming, bathing, etc.
3. Tips to make things run smoothly:
  - a. There needs to be an ICD 10 **diagnosis code** in the chart notes for the mobility limitation.
  - b. If you state patient has upper extremity weakness that prevents them from self-propelling an optimally configured manual wheelchair, we need to know what condition is causing that along with an ICD 10 code.
4. Write a **prescription for PT/OT Wheelchair Evaluation**; we can help patient schedule that at a facility of their choice.

**\*Once the 4 steps above are completed, we can take it from there. There will be additional forms for you to complete once the PT/OT evaluation is performed and the correct mobility device is chosen to best meet your patient's needs.**

**Please Fax patient demographics, PT/OT prescription, and F2F notes to 618.997.1385 and if you have ANY questions, call: 618.998.9250**