



Power Mobility Devices (PMD) (Power Operated Vehicles (POVs) and Power Wheelchairs (PWCs)) and Accessories (Single Service)

Clinical Guidelines for Medical Necessity Review

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Guideline Information:

Specialty Area: Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)
Guideline Name: Power Mobility Devices (PMD) (Power Operated Vehicles (POVs) and Power Wheelchairs (PWCs)) and Accessories (Single Service)

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Medical Necessity Criteria

Service: Power Mobility Devices (PMD) (Power Operated Vehicles (POVs) and Power Wheelchairs (PWCs)) and Accessories

General Guidelines

- **Units, Frequency, & Duration:** None
- **Criteria for Subsequent Requests:** Approval when the patient meets the medical necessity criteria below.
- **Recommended Clinical Approach¹⁻⁴:** Mobility devices, such as a power wheelchair (PWC) or power-operated vehicle (POV)/scooter, may be required for a short-term acute disability episode or for a longer-term, chronic need. The living environment of the individual must be determined safe for maneuvering the power wheelchair. Return to or maintaining independent function as much as possible is the expected outcome. Associated conditions that may require power wheelchair use include stroke, multiple sclerosis, paraplegia, cerebral palsy, or rheumatoid arthritis. Individuals may have physical or mental deficits that may not allow a manual wheelchair to be used⁵⁻⁷.
- **Exclusions:** The scope of this document does not include manual wheelchairs.

Medical Necessity Criteria

Indications

- **Power wheelchairs and power operated vehicles (POVs)** are considered appropriate if **ALL** of the following are **TRUE¹⁻⁴**:
- ◆ **ALL** of the following are **TRUE**:
 - The mobility device has been ordered by a licensed healthcare professional; **AND**
 - Mobility limitation cannot be resolved with a cane or walker (appropriately fitted); **AND**
 - The individual has a mobility limitation with **ANY** of the following:

- Unable to or significantly impaired ability to participate in one or more mobility-related activities of daily living (MRADLs) (e.g., toileting, bathing, dressing, grooming, feeding) due to a muscular or neurological disorder; **OR**
- Without the mobility device, the individual would be bed or chair-confined, or is at-risk for injury while attempting to complete MRADLs; **AND**
- The individual does not have sufficient upper extremity function to self-propel an optimally-configured manual wheelchair in the home; **AND**
- **ANY** of the following power wheelchair/POV types:
 - A **power operated vehicle (POV/scooter)** (K0800, K0801, K0802, K0806, K0807, K0808, K0812) is appropriate when the individual can accomplish **ALL** of the following:
 - ◆ Transfer safely to and from the POV; **AND**
 - ◆ Maintain appropriate stability and posture while operating the POV; **AND**
 - ◆ Safely operate the tiller steering system; **AND**
 - ◆ Mental and physical capabilities are adequate to allow safe navigation of the POV in the home; **AND**
 - ◆ Appropriate body weight for the specific POV; **AND**
 - ◆ Ability to participate in MRADLs will greatly improve by using the POV in the home; **OR**
 - A **power wheelchair (PWC)** (K0813, K0816, K0820, K0821-K0829, K0835-K0843, K0848-K0864, K0868-K0871, K0877-K0880, K0884-K0886, K0890, K0891, K0898) is appropriate when **ALL** of the following are **TRUE**:
 - ◆ Criteria above for POV/scooter are not met; **AND**
 - ◆ **ANY** of the following:
 - The individual is physically and mentally able to safely control a power wheelchair in typical situations, **OR**

- A caregiver who is willing and able to assist the individual with the wheelchair is available; **AND**
 - ◆ The individual has an appropriate body weight for the specific PWC; **AND**
 - ◆ Ability to participate in MRADLs will greatly improve by using the PWC in the home; **AND**
- ◆ **Criteria for specific types of power mobility devices** include **ANY** of the following:
 - The request is for a POV; **OR**
 - Group 1 PWC (K0813-K0816) or a Group 2 PWC (K0820-K0829) is appropriate if all of the coverage criteria for a PWC are met and the wheelchair is appropriate for the individual's weight; **OR**
 - For other PWC types, **ANY** of the following are required:
 - A **Group 2 Single Power Option PWC** (K0835-K0840) is appropriate if all of the coverage criteria for a PWC are met and **ANY** of the following:
 - ◆ A drive control interface other than a hand or chin-operated standard proportional joystick is required (examples include but are not limited to head control, sip and puff, switch control); **OR**
 - ◆ Power tilt or a power recline seating system is required and the system is being used on the wheelchair; **OR**
 - A **Group 2 Multiple Power Option PWC** (K0841-K0843) is appropriate if all of the coverage criteria for a PWC are met and **ANY** of the following:
 - ◆ A power tilt or power recline seating system is required and being used on the PWC; **OR**
 - ◆ The individual uses a ventilator which is mounted on the wheelchair; **OR**
 - A **Group 3 PWC** (K0848-K0855) is appropriate if all of the coverage criteria for a PWC are met and **ALL** of the following:
 - ◆ Mobility limitation is related to a neurological condition, congenital skeletal deformity, or myopathy; **AND**

- ◆ **ANY** of the following power options are appropriate:
 - **No power option** (K0848, K0849, K0850, K0851, K0852, K0853, K0854, K0855); **OR**
 - **Single power option** (K0856, K0857, K0858, K0859, K0860) with **ONE or more** of the following:
 - A drive control interface other than a hand or chin operated proportional joystick, such as head control, sip and puff is needed; **OR**
 - A power tilt or power recline seating system is required and being used on the PWC; **OR**
 - **Multiple power options** (K0861, K0862, K0863, K0864) with **ANY** of the following:
 - A power tilt or power recline seating system is required and being used on the PWC; **OR**
 - The individual uses a ventilator which is mounted on the wheelchair; **OR**
- **Group 5 (pediatric) PWC**, when all the coverage criteria for a PWC are met and **ALL** of the following:
 - ◆ The individual is expected to grow in height; **AND**
 - ◆ Power options are appropriate and **ONE or more** of the following:
 - **Single power option** (K0890) with **ONE or more** of the following:
 - A drive control interface other than a hand or chin operated proportional joystick, such as head control, sip and puff is needed; **OR**
 - A power tilt or power recline seating system is required and being used on the PWC; **OR**
 - **Multiple power options** (K0891) with **ONE or more** of the following:

- A power tilt or power recline seating system is required and being used on the PWC; **OR**
 - The individual uses a ventilator which is mounted on the wheelchair; **OR**
- A **custom motorized/power wheelchair base** (K0013) is appropriate when the coverage criteria for a PWC above are met and **ALL** of the following are **TRUE**:
 - ◆ The individual's physical needs cannot be met by a standard PWC or with wheelchair cushions, or options or accessories (prefabricated or custom fabricated), which may be added to another power wheelchair base; **AND**
 - ◆ The expected duration of need is more than 3 months; **OR**
- The following PWC accessories are appropriate when **ANY** of the following is **TRUE**³:
 - ◆ Adjustable arm height option (E0973, K0017, K0018, K0020) is considered appropriate if **ALL** of the following are **TRUE**:
 - The individual requires an arm height that is different from what is available using nonadjustable arms; **AND**
 - The individual spends at least 2 hours per day in the wheelchair; **OR**
 - ◆ An arm trough (E2209) is considered appropriate if the individual has **ANY** of the following:
 - Quadriplegia; **OR**
 - Hemiplegia; **OR**
 - Uncontrolled arm movements; **OR**
 - ◆ **Footrest/legrest** and **ANY** of the following:
 - **Elevating legrests** (E0990, K0046, K0047, K0053, K0195) are considered appropriate if the individual has **ANY** of the following:
 - The individual has a musculoskeletal condition that limits mobility or a cast or brace

which prevents 90 degree flexion at the knee; **OR**

- The individual has significant, edema of the lower extremities that requires an elevating legrest; **OR**
- The individual requires a reclining back on the wheelchair; **OR**

◆ A **nonstandard seat width and/or depth** for a manual wheelchair is considered appropriate only if required by the individual's physical dimensions; **OR**

◆ **Power tilt and/or recline seating systems** (E1002, E1003, E1004, E1005, E1006, E1007, E1008, E1009, E1010, E1012) and **ALL** of the following:

- The individual has met the coverage criteria above for a power wheelchair; **AND**
- **ANY** of the following:
 - The individual is at high risk for pressure ulcer development and is unable to shift weight independently; **OR**
 - The individual manages bladder with intermittent catheterization and is unable to transfer independently from the wheelchair to bed; **OR**
 - The power seating system is necessary to manage increased tone or spasticity; **OR**

◆ **Power seat elevation system** (E2300) and **ANY** of the following⁸:

- The individual is able to perform weight bearing transfers to and from the PWC with or without caregiver and/or use of assistive equipment; **OR**
- A non-weight bearing transfer to/from the PWC is required with or without a floor or mounted lift; **OR**

- The individual must reach from the PWC to complete MRADLs with or without caregiver assistance; **OR**
- ◆ **Power wheelchair drive control systems/attendant control** and **ALL** of the following are **TRUE**:
 - The individual meets coverage criteria for a wheelchair; **AND**
 - Is unable to operate a manual or power wheelchair; **AND**
 - Has a caregiver who is unable to operate a manual wheelchair but is able to operate a power wheelchair; **OR**
- ◆ **Miscellaneous accessories**, including **ANY** of the following:
 - **An electronic interface (E2351)** to allow a speech generating device to be operated by the power wheelchair control interface is considered appropriate if the individual has a covered speech generating device; **OR**
 - **Anti-rollback device (E0974)** is considered appropriate if the individual self-propels and needs the device because of ramps; **OR**
 - A **safety belt/pelvic strap (E0978)** is considered appropriate if the individual has upper body weakness, instability, or muscle spasticity which requires use of this item for proper positioning; **OR**
 - A **manual fully reclining back option (E1226)** is considered appropriate if **ANY** of the following is **TRUE**:
 - The individual is at high risk for pressure ulcer development and is unable to shift weight independently; **OR**
 - The individual manages bladder with intermittent catheterization

and is unable to transfer independently from the wheelchair to bed; **OR**

- **Swingaway, retractable, or removable hardware** (E1028) may be considered appropriate to move the component out of the way so that an individual can perform a slide transfer to a chair or bed; **OR**
- A **single mode battery charger** (E2366) is appropriate for charging a sealed lead acid battery³; **OR**
- The usual maximum frequency of replacement for a lithium-based battery (E2397) is one every 3 years. Only one battery is allowed at any one time; **OR**
- Up to two batteries (E2359, E2361, E2363, E2365, E2371, K0733) at any one time are allowed if required for a power wheelchair.

Non-Indications

→ **Power wheelchairs and power operated vehicles** are **NOT** considered appropriate if **ANY** of the following are **TRUE**^{1-4,8}:

- ◆ Request is for a backup or extra wheelchair; **OR**
- ◆ The wheelchair is requested for outside the home use only; **OR**
- ◆ A custom PWC is not considered appropriate if it is expected to be needed less than three (3) months; **OR**
- ◆ A power wheelchair or power operated vehicle is not considered appropriate if it is expected to be needed less than three (3) months; **OR**
- ◆ The individual exceeds the appropriate weight for the PWC or POV (heavy duty – 285 – 450 pounds, for very heavy duty – 428 – 600 pounds, for extra heavy duty – 570 pounds or more); **OR**
- ◆ A non-sealed battery (E2358, E2360, E2362, E2364, E2372) is **NOT** considered appropriate; **OR**
- ◆ Group 2 POVs (K0806, K0807, K0808) have capabilities that are not considered reasonable and necessary for use in the home; **OR**

- ◆ Group 4 PWCs (K0868, K0869, K0870, K0871, K0877, K0878, K0879, K0880, K0884, K0885, K0886) have capabilities that are not considered reasonable and necessary for use in the home.

Level of Care Criteria

Outpatient

Procedure Codes (HCPCS/CPT)

HCPCS/CPT Code	Code Description
A9270	Non-covered item or service
A9900	Miscellaneous DME supply, accessory, and/or service component of another HCPCS code
E0705	Transfer device, any type, each
E0950	Wheelchair accessory, tray, each
E0951	Heel loop/holder, any type, with or without ankle strap, each
E0952	Toe loop/holder, any type, each
E0954	Wheelchair accessory, foot box, any type, includes attachment and mounting hardware, each foot
E0973	Wheelchair accessory, adjustable height, detachable armrest, complete assembly, each
E0978	Wheelchair accessory, positioning belt/safety belt/pelvic strap, each
E0981	Wheelchair accessory, seat upholstery, replacement only, each
E0982	Wheelchair accessory, back upholstery, replacement only, each
E0983	Manual wheelchair accessory, power add-on to convert manual wheelchair to motorized wheelchair, joystick control
E0984	Manual wheelchair accessory, power add-on to convert manual wheelchair to motorized wheelchair, tiller control
E0985	Wheelchair accessory, seat lift mechanism

E0986	Manual wheelchair accessory, push-rim activated power assist system
E0988	Manual wheelchair accessory, lever-activated, wheel drive, pair
E0990	Wheelchair accessory, elevating leg rest, complete assembly, each
E0995	Wheelchair accessory, calf rest/pad, replacement only, each
E1002	Wheelchair accessory, power seating system, tilt only
E1003	Wheelchair accessory, power seating system, recline only, without shear reduction
E1004	Wheelchair accessory, power seating system, recline only, with mechanical shear reduction
E1005	Wheelchair accessory, power seating system, recline only, with power shear reduction
E1006	Wheelchair accessory, power seating system, combination tilt and recline, without shear reduction
E1007	Wheelchair accessory, power seating system, combination tilt and recline, with mechanical shear reduction
E1008	Wheelchair accessory, power seating system, combination tilt and recline, with power shear reduction
E1009	Wheelchair accessory, addition to power seating system, mechanically linked leg elevation system, including pushrod and leg rest, each
E1010	Wheelchair accessory, addition to power seating system, power leg elevation system, including leg rest, pair
E1011	Modification to pediatric size wheelchair, width adjustment package (not to be dispensed with initial chair)
E1012	Wheelchair accessory, addition to power seating system, center mount power elevating leg rest/platform, complete system, any type, each

E1014	Reclining back, addition to pediatric size wheelchair
E1015	Shock absorber for manual wheelchair, each
E1016	Shock absorber for power wheelchair, each
E1017	Heavy duty shock absorber for heavy duty or extra heavy duty manual wheelchair, each
E1018	Heavy duty shock absorber for heavy duty or extra heavy duty power wheelchair, each
E1020	Residual limb support system for wheelchair, any type
E1028	Wheelchair accessory, manual swingaway, retractable or removable mounting hardware for joystick, other control interface or positioning accessory
E1029	Wheelchair accessory, ventilator tray, fixed
E1030	Wheelchair accessory, ventilator tray, gimbaled
E1037	Transport chair, pediatric size
E1038	Transport chair, adult size, patient weight capacity up to and including 300 pounds
E1039	Transport chair, adult size, heavy duty, patient weight capacity greater than 300 pounds
E1229	Wheelchair, pediatric size, not otherwise specified
E1231	Wheelchair, pediatric size, tilt-in-space, rigid, adjustable
E1232	Wheelchair, pediatric size, tilt-in-space, folding, adjustable, with seating system
E1233	Wheelchair, pediatric size, tilt-in-space, rigid, adjustable, without seating system
E1234	Wheelchair, pediatric size, tilt-in-space, folding, adjustable, without seating system
E1235	Wheelchair, pediatric size, rigid, adjustable, with seating system
E1236	Wheelchair, pediatric size, folding, adjustable, with seating system
E1237	Wheelchair, pediatric size, rigid, adjustable, without seating system

E1238	Wheelchair, pediatric size, folding, adjustable, without seating system
E2207	Wheelchair accessory, crutch and cane holder, each
E2208	Wheelchair accessory, cylinder tank carrier, each
E2209	Accessory, arm trough, with or without hand support, each
E2210	Wheelchair accessory, bearings, any type, replacement only, each
E2300	Wheelchair accessory, power seat elevation system, any type
E2301	Wheelchair accessory, power standing system, any type
E2310	Power wheelchair accessory, electronic connection between wheelchair controller and one power seating system motor, including all related electronics, indicator feature, mechanical function selection switch, and fixed mounting hardware
E2311	Power wheelchair accessory, electronic connection between wheelchair controller and two or more power seating system motors, including all related electronics, indicator feature, mechanical function selection switch, and fixed mounting hardware
E2312	Power wheelchair accessory, hand or chin control interface, mini-proportional remote joystick, proportional, including fixed mounting hardware
E2313	Power wheelchair accessory, harness for upgrade to expandable controller, including all fasteners, connectors and mounting hardware, each
E2321	Power wheelchair accessory, hand control interface, remote joystick, non proportional, including all related electronics, mechanical stop switch, and fixed mounting hardware
E2322	Power wheelchair accessory, hand control interface, multiple mechanical switches, non proportional, including all related electronics, mechanical stop switch, and fixed mounting hardware

E2323	Power wheelchair accessory, specialty joystick handle for hand control interface, prefabricated
E2324	Power wheelchair accessory, chin cup for chin control interface
E2325	Power wheelchair accessory, sip and puff interface, non proportional, including all related electronics, mechanical stop switch, and manual swingaway mounting hardware
E2326	Power wheelchair accessory, breath tube kit for sip and puff interface
E2327	Power wheelchair accessory, head control interface, mechanical, proportional, including all related electronics, mechanical direction change switch, and fixed mounting hardware
E2328	Power wheelchair accessory, head control or extremity control interface, electronic, proportional, including all related electronics and fixed mounting hardware
E2329	Power wheelchair accessory, head control interface, contact switch mechanism, non proportional, including all related electronics, mechanical stop switch, mechanical direction change switch, head array, and fixed mounting hardware
E2330	Power wheelchair accessory, head control interface, proximity switch mechanism, non proportional, including all related electronics, mechanical stop switch, mechanical direction change switch, head array, and fixed mounting hardware
E2331	Power wheelchair accessory, attendant control, proportional, including all related electronics and fixed mounting hardware
E2351	Power wheelchair accessory, electronic interface to operate speech generating device using power wheelchair control interface
E2358	Power wheelchair accessory, group 34 non-sealed lead acid battery, each

E2359	Power wheelchair accessory, group 34 sealed lead acid battery, each (e.g., gel cell, absorbed glass mat)
E2360	Power wheelchair accessory, 22nf non-sealed lead acid battery, each
E2361	Power wheelchair accessory, 22nf sealed lead acid battery, each, (e.g., gel cell, absorbed glass mat)
E2362	Power wheelchair accessory, group 24 non-sealed lead acid battery, each
E2363	Power wheelchair accessory, group 24 sealed lead acid battery, each (e.g., gel cell, absorbed glass mat)
E2364	Power wheelchair accessory, u-1 non-sealed lead acid battery, each
E2365	Power wheelchair accessory, u-1 sealed lead acid battery, each (e.g., gel cell, absorbed glass mat)
E2366	Power wheelchair accessory, battery charger, single mode, for use with only one battery type, sealed or non-sealed, each
E2367	Power wheelchair accessory, battery charger, dual mode, for use with either battery type, sealed or non-sealed, each
E2368	Power wheelchair component, drive wheel motor, replacement only
E2369	Power wheelchair component, drive wheel gear box, replacement only
E2370	Power wheelchair component, integrated drive wheel motor and gearbox combination, replacement only
E2371	Power wheelchair accessory, group 27 sealed lead acid battery, (e.g., gel cell, absorbed glass mat), each
E2372	Power wheelchair accessory, group 27 non-sealed lead acid battery, each
E2373	Power wheelchair accessory, hand or chin control interface, compact remote joystick, proportional, including fixed mounting hardware

E2374	Power wheelchair accessory, hand or chin control interface, standard remote joystick (not including controller), proportional, including all related electronics and fixed mounting hardware, replacement only
E2375	Power wheelchair accessory, non-expandable controller, including all related electronics and mounting hardware, replacement only
E2376	Power wheelchair accessory, expandable controller, including all related electronics and mounting hardware, replacement only
E2377	Power wheelchair accessory, expandable controller, including all related electronics and mounting hardware, upgrade provided at initial issue
E2378	Power wheelchair component, actuator, replacement only
E2381	Power wheelchair accessory, pneumatic drive wheel tire, any size, replacement only, each
E2382	Power wheelchair accessory, tube for pneumatic drive wheel tire, any size, replacement only, each
E2383	Power wheelchair accessory, insert for pneumatic drive wheel tire (removable), any type, any size, replacement only, each
E2384	Power wheelchair accessory, pneumatic caster tire, any size, replacement only, each
E2385	Power wheelchair accessory, tube for pneumatic caster tire, any size, replacement only, each
E2386	Power wheelchair accessory, foam filled drive wheel tire, any size, replacement only, each
E2387	Power wheelchair accessory, foam filled caster tire, any size, replacement only, each
E2388	Power wheelchair accessory, foam drive wheel tire, any size, replacement only, each
E2389	Power wheelchair accessory, foam caster tire, any size, replacement only, each
E2390	Power wheelchair accessory, solid (rubber/plastic) drive wheel tire, any size, replacement only, each

E2391	Power wheelchair accessory, solid (rubber/plastic) caster tire (removable), any size, replacement only, each
E2392	Power wheelchair accessory, solid (rubber/plastic) caster tire with integrated wheel, any size, replacement only, each
E2394	Power wheelchair accessory, drive wheel excludes tire, any size, replacement only, each
E2395	Power wheelchair accessory, caster wheel excludes tire, any size, replacement only, each
E2396	Power wheelchair accessory, caster fork, any size, replacement only, each
E2397	Power wheelchair accessory, lithium-based battery, each
E2398	Wheelchair accessory, dynamic positioning hardware for back
K0001	Standard wheelchair
K0002	Standard hemi (low seat) wheelchair
K0003	Lightweight wheelchair
K0004	High strength, lightweight wheelchair
K0005	Ultra Lightweight wheelchair
K0006	Heavy duty wheelchair
K0007	Extra heavy duty wheelchair
K0008	Custom manual wheelchair/base
K0009	Other manual wheelchair/base
K0013	Custom motorized/power wheelchair base
K0015	Detachable, non-adjustable height armrest, replacement only, each
K0017	Detachable, adjustable height armrest, base, replacement only, each
K0018	Detachable, adjustable height armrest, upper portion, replacement only, each
K0019	Arm pad, replacement only, each
K0020	Fixed, adjustable height armrest, pair
K0037	High mount flip-up footrest, each

K0038	Leg strap, each
K0039	Leg strap, h style, each
K0040	Adjustable angle footplate, each
K0041	Large size footplate, each
K0042	Standard size footplate, replacement only, each
K0043	Footrest, lower extension tube, replacement only, each
K0044	Footrest, upper hanger bracket, replacement only, each
K0045	Footrest, complete assembly, replacement only, each
K0046	Elevating legrest, lower extension tube, replacement only, each
K0047	Elevating legrest, upper hanger bracket, replacement only, each
K0050	Ratchet assembly, replacement only
K0051	Cam release assembly, footrest or legrest, replacement only, each
K0052	Swingaway, detachable footrests, replacement only, each
K0053	Elevating footrests, articulating (telescoping), each
K0056	Seat height less than 17" or equal to or greater than 21" for a high strength, lightweight, or ultra lightweight wheelchair
K0065	Spoke protectors, each
K0069	Rear wheel assembly, complete, with solid tire, spokes or molded, replacement only, each
K0070	Rear wheel assembly, complete, with pneumatic tire, spokes or molded, replacement only, each
K0071	Front caster assembly, complete, with pneumatic tire, replacement only, each
K0072	Front caster assembly, complete, with semi-pneumatic tire, replacement only, each
K0073	Caster pin lock, each
K0077	Front caster assembly, complete, with solid tire, replacement only, each

K0098	Drive belt for power wheelchair, replacement only
K0105	Iv hanger, each
K0108	Wheelchair component or accessory, not otherwise specified
K0195	Elevating leg rests, pair (for use with capped rental wheelchair base)
K0733	Power wheelchair accessory, 12 to 24 amp hour sealed lead acid battery, each (e.g., gel cell, absorbed glass mat)
K0800	Power operated vehicle, group 1 standard, patient weight capacity up to and including 300 pounds.
K0801	Power operated vehicle, group 1 heavy duty, patient weight capacity 301-405 pounds
K0802	Power operated vehicle, group 1 heavy duty, patient weight capacity 451 to 600 pounds
K0806	Power operated vehicle, Group 2 standard, patient weight capacity up to and including 300 pounds
K0807	Power operated vehicle, group 2 heavy duty, patient weight capacity 301 to 450 pounds
K0808	Power operated vehicle, group 2 very heavy duty, patient weight capacity 451 to 600 pounds
K0812	Power operated vehicle, not otherwise classified
K0813	Power wheelchair, group 1 standard, portable, sling/solid seat and back, patient weight capacity up to and including 300 pounds
K0814	Power wheelchair, group 1 standard, portable, captains chair, patient weight capacity up to and including 300 pounds
K0815	Power wheelchair, group 1 standard, sling/solid seat and back, patient weight capacity up to and including 300 pounds

K0816	Power wheelchair, group 1 standard, captains chair, patient weight capacity up to and including 300 pounds
K0820	Power wheelchair, group 2 standard, portable, sling/solid seat/back, patient weight capacity up to and including 300 pounds
K0821	Power wheelchair, group 2 standard, portable, captains chair, patient weight capacity up to and including 300 pounds
K0822	Power wheelchair, group 2 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds
K0823	Power wheelchair, group 2 standard, captains chair, patient weight capacity up to and including 300 pounds
K0824	Power wheelchair, group 2 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds
K0825	Power wheelchair, group 2 heavy duty, captains chair, patient weight capacity 301 to 450 pounds
K0826	Power wheelchair, group 2 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds
K0827	Power wheelchair, group 2 very heavy duty, captains chair, patient weight capacity 451 to 600 pounds
K0828	Power wheelchair, group 2 extra heavy duty, sling/solid seat/back, patient weight capacity 601 pounds or more
K0829	Power wheelchair, group 2 extra heavy duty, captains chair, patient weight 601 pounds or more
K0830	Power wheelchair, group 2 standard, seat elevator,

	sling/solid seat/back, patient weight capacity up to and including 300 pounds
K0831	Power wheelchair, group 2 standard, seat elevator, captains chair, patient weight capacity up to and including 300 pounds
K0835	Power wheelchair, group 2 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds
K0836	Power wheelchair, group 2 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds
K0837	Power wheelchair, group 2 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds
K0838	Power wheelchair, group 2 heavy duty, single power option, captains chair, patient weight capacity 301 to 450 pounds
K0839	Power wheelchair, group 2 very heavy duty, single power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds
K0840	Power wheelchair, group 2 extra heavy duty, single power option, sling/solid seat/back, patient weight capacity 601 pounds or more
K0841	Power wheelchair, group 2 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds
K0842	Power wheelchair, group 2 standard, multiple power option, captains chair, patient weight capacity up to and including 300 pounds
K0843	Power wheelchair, group 2 heavy duty, multiple power option, sling/solid seat/back, patient weight

	capacity 301 to 450 pounds
K0848	Power wheelchair, group 3 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds
K0849	Power wheelchair, group 3 standard, captains chair, patient weight capacity up to and including 300 pounds
K0850	Power wheelchair, group 3 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds
K0851	Power wheelchair, group 3 heavy duty, captains chair, patient weight capacity 301 to 450 pounds
K0852	Power wheelchair, group 3 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds
K0853	Power wheelchair, group 3 very heavy duty, captains chair, patient weight capacity 451 to 600 pounds
K0854	Power wheelchair, group 3 extra heavy duty, sling/solid seat/back, patient weight capacity 601 pounds or more
K0855	Power wheelchair, group 3 extra heavy duty, captains chair, patient weight capacity 601 pounds or more
K0856	Power wheelchair, group 3 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds
K0857	Power wheelchair, group 3 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds
K0858	Power wheelchair, group 3 heavy duty, single power option, sling/solid seat/back, patient weight 301 to

	450 pounds
K0859	Power wheelchair, group 3 heavy duty, single power option, captains chair, patient weight capacity 301 to 450 pounds
K0860	Power wheelchair, group 3 very heavy duty, single power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds
K0861	Power wheelchair, group 3 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds
K0862	Power wheelchair, group 3 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds
K0863	Power wheelchair, group 3 very heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds
K0864	Power wheelchair, group 3 extra heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 601 pounds or more
K0868	Power wheelchair, group 4 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds
K0869	Power wheelchair, group 4 standard, captains chair, patient weight capacity up to and including 300 pounds
K0870	Power wheelchair, group 4 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds
K0871	Power wheelchair, group 4 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds

K0877	Power wheelchair, group 4 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds
K0878	Power wheelchair, group 4 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds
K0879	Power wheelchair, group 4 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds
K0880	Power wheelchair, group 4 very heavy duty, single power option, sling/solid seat/back, patient weight 451 to 600 pounds
K0884	Power wheelchair, group 4 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds
K0885	Power wheelchair, group 4 standard, multiple power option, captains chair, patient weight capacity up to and including 300 pounds
K0886	Power wheelchair, group 4 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds
K0890	Power wheelchair, group 5 pediatric, single power option, sling/solid seat/back, patient weight capacity up to and including 125 pounds
K0891	Power wheelchair, group 5 pediatric, multiple power option, sling/solid seat/back, patient weight capacity up to and including 125 pounds
K0898	Power wheelchair, not otherwise classified

Medical Evidence

The Agency for Healthcare and Research Quality (AHRQ) (2012) published a Technical Brief related to wheelchair service delivery. With a tendency to be under- or over-prescribed, matching patients with the correct mobility device is of importance. Their recommendation includes patient evaluation, equipment selection, delivery, and training. A lack of research was found on effectiveness of recommended approaches⁵.

Nelson and Alexander (2019) discuss the client's environment as an influence for the prescription for a wheeled device. Wheelchair skills training is essential for safe operation of the wheelchair by the individual for whom it is prescribed. They state that ultralightweight wheelchairs are preferred for independent manual propulsion. The addition of power seat functions assist in positioning, activities of daily living, transfers, and bowel and bladder management⁷.

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