In order to qualify for a wheelchair seat cushion, the patient must meet Medicare guidelines and have a manual wheelchair or a power wheelchair with a sling/solid seat/back and the patient meets Medicare coverage criteria for it.

The patient has any significant postural asymmetries that are due to one of these diagnoses:

- Cerebral Palsy
- Spastic Palsy
- Dystatic Palsy
- Friedreich's Ataxia
- Ataxia
- Spinal Muscular Atrophy
- Myopathies
- Spinocerebellar Disease
- Paraplegia
- Quadriplegia
- Hemiplegia
- Proximal Muscle Weakness
- Nerve Palsy
- Trauma

The patient has either of the following:

- Current pressure ulcer, buttock 707.05
- Past history of a pressure ulcer 707.03

A combination skin protection and positioning seat cushion (E2607, E2608) is covered for a patient who meets the criteria for both a skin protection seat cushion and a positioning seat cushion or one of the diagnoses above.
In order to qualify for a wheelchair back cushion, the patient must meet Medicare guidelines and have a manual wheelchair or a power wheelchair with a sling/solid seat/back and the patient meets Medicare coverage criteria for it.

The patient has any significant postural asymmetries that are due to one of these diagnoses:

- Spastic Hemiplegia affecting unspecified side
- Hemiplegia affecting unspecified side
- Late effects of Cerebrovascular Disease
- Congenital Dysplasia - Infantsile Cerebral Palsy
- Congenital Hereditary Muscular Dystrophy
- Late effects of Congenital Anomalies of the Cauda Equina
- Late effects of Myelodysplasia
- Late effects of Myelomeningocele
- Late effects of Other Diseases of the Spinal Cord

These conditions may include, but are not limited to, the following diagnoses:

- Spastic Hemiplegia affecting unspecified side
- Hemiplegia affecting unspecified side
- Late effects of Cerebrovascular Disease
- Congenital Dysplasia - Infantsile Cerebral Palsy
- Congenital Hereditary Muscular Dystrophy
- Late effects of Congenital Anomalies of the Cauda Equina
- Late effects of Myelodysplasia
- Late effects of Myelomeningocele
- Late effects of Other Diseases of the Spinal Cord

This information is not intended to be, nor should it be considered billing or legal advice. Providers are responsible for determining the appropriate billing codes when submitting claims to the Medicare Program and should consult an attorney or other advisor to discuss specific situations in further detail.

The cushion will be denied as not medically necessary if:

- The patient does not meet the coverage criteria for a wheelchair and/or does not have a wheelchair
- The patient has a POV or a power wheelchair with a Captain's Chair seat and/or back cushion

If a general use seat and/or back cushion is provided with a power wheelchair with a sling/solid seat/back, total payment for those items (cushion(s) plus the wheelchair) will be based on:

- The allowance for the least costly medically appropriate alternative — e.g., the code for the comparable power wheelchair with Captain's Chair, if that code exists (see Power Mobility Device policy for additional information.)

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