



Seat Lift Order and Documentation Requirements

Medicare, and other insurance providers that follow Medicare guidelines, requires that a physician, NP, CNS or PA has had a Face-to-Face (F2F) examination with the patient that documents that the patient was evaluated and/or treated for a condition that supports the need for the prescribed equipment. The date of the F2F exam may be no older than 6 months prior to the prescription date.

A Written Order Prior to Delivery (WOPD) is also required; the WOPD cannot be completed until after the F2F exam, and must be received by the supplier prior to dispensing the equipment. This order must contain:

- Patient's name
- Physician's name
- Date of the order and the start date, if start date is different from date of order
- Detailed description of the item(s)
- Ordering Practitioner's National Provider Identifier (NPI)
- Signature of ordering practitioner and signature date. Signature and date stamps are not allowed. Signatures must be legible and/or physician's name must also be printed.

Seat Lift Mechanism Coverage Criteria:

1. The patient **MUST** have diagnosis of:
 - A. Severe arthritis of the hip or knee **OR**
 - B. Severe neuromuscular disease
2. The seat lift must be **part of the physician's course of treatment** and be prescribed to aid in improvement, or slow deterioration, in the patient's condition.
3. The patient **must be completely incapable of standing up** from a regular armchair or any chair in their home.
4. Once standing, the patient **must have the ability to ambulate**.
5. **Other therapeutic modalities have been tried** and failed.

Patient Medical Records must contain documentation of the following:

1. The Face-to-Face (F2F) examination. This can be an inpatient admit H&P, discharge note or progress note, or an outpatient chart note. The qualifying criteria for the prescribed equipment must be met and documented in the F2F notes. ***If a PA, NP or CNS performs the F2F exam, a physician (MD or DO) must co-sign and date the F2F encounter.***
2. Documentation that all appropriate therapeutic modalities, such as medication or physical therapy, have been tried and failed to enable the patient to transfer from a chair to a standing position.

Physicians who have patients with Medicare/Medicare replacement insurances are also required to complete a Certificate of Medical Necessity; this will be faxed to the doctor for completion once all qualifying documentation has been received.

Thank you for making Rice Home Medical part of your healthcare team. Please call 320-235-8434 with questions.