

State of Iowa: Billing Custom Wheelchairs in a LTC Facility

RESPONSIBILITY OF THE THERPIST	RESPONSIBILITY OF MOBILIS
1. Therapist identifies an unmet need for a new customized wheelchair with their Medicaid residents.	
2. Contact Mobilis ATP (Assitive Tech. Professional) to line up a time for a personal evaluation at your facility.	1. Mobilis receives a call from the Therapist re: resident evaluation. Decide on date and time for evaluation.
	2. Evaluate resident for chair with the Therapist present. Both parties: what chair works best for the resident.
	3. Before leaving the facilty, get a copy of demographic sheet to help verify insurance & enter pt. into our system.
3. Trial chair is issued to the resident, at the request of the Therapist.	4. Provide Trial Chair if necessary. (At the request of the Therapist.)
4. A Letter of Medical Necessity (LMN) is written by Therapist and faxed to Mobilis at 712.328.2299.	5. Receive Letter of Medical Necessity (LMN) from Therapist.
	6. a) Send LMN to the resident's Physician for concurrence and ask for Dr.'s signature and date. b) Also send Written Order (WOPD) asking for Phys. signature & date.
	7. Receive LMN and WOPD signed by Physician with date.
	8. Send signed WOPD & LMN with Dr.'s signature & date with to IA Medicaid for Prior Authorization.
	9. Prior Authorization is received from Medicaid. Wheelchair will be ordered Mobilis.
5. The resident recieves their own chair and fitted by Mobilis ATP. The trial chair is picked up by Mobilis rep.	10. Notify LTC that their chair has been received and make delivery time with Therapist. Pick up trial chair.
	11. Mobilis will bill Iowa Medicaid.

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