

Gait Trainers PA Overview

*Note codes E8000, E8001 and E8002 encompass ALL accessories and components and should be the ONLY code requested for a new item. Separate parts, accessories/components should ONLY be requested for repair/replacement of patient owned gait trainer/walker.

DOCUMENTATION REQUIRED:

1. Letters of Medical Necessity
 - a. Include current history and physical, current diagnosis, prognosis, ambulatory status, height and weight of member;
And
 - b. Medical necessity for the specific make and model of gait trainer requested with all accessories specified and medical necessity documented for each accessory.
2. IEP showing gait training/walker goals, if available.
3. Documented gait training/walker **TRIAL**, including results of trial showing:
 - a. **Distance** member can advance the gait trainer/walker without assistance of another person.
 - b. How **long** it takes member to advance the gait trainer/walker for the specified distance.
4. Documentation of Gross Motor Function Classification System (GMFCS).
5. In what setting will the gait trainer be used? (i.e., living room, bedroom, school, church). Does the member's home accommodate the gait trainer/walker?
6. How will gait trainer/walker be transported?
7. What other less costly gait trainers/walkers have been trialed, for how long, and why were they ruled out for this member?
8. DME equipment is expected to last at least 5 years; can the gait trainer/walker be "grown"?
9. If replacing current gait trainer/walker prior to 5 years, documentation should be given why replacement gait trainer/walker is needed rather than "growing" or repairing current gait trainer/walker.