Dear Wheelchair Seating Service Customers:

During the past several years there have been many changes in the healthcare industry involving Durable Medical Equipment (DME). Durable Medical Equipment includes but is not limited to all types of wheelchairs, strollers, power-operated vehicles, bath equipment, specialized walkers, beds, as well as many other items.

Most insurance companies require very detailed justification for the purchase of DME and they require either a Physical or Occupational Therapist, or a Doctor to write the justification. Most often a Therapist does this because they have extensive training in both the physical needs and capabilities of the patient as well as having knowledge of the equipment being requested. Most insurances require a Letter of Medical Necessity (LMN) be written listing every item being requested (such as on a wheelchair, arm style, footrest, back style, cushion or seating needs, anti tippers, flat free inserts, style of batteries, and so on). Then they require each item to be justified as why it is medically necessary. In addition to this LMN some insurance's such as Medicare require a Certificate of Medical Necessity (CMN). This form is most often filled out by the Therapist, and the company providing the equipment, and then signed by the Doctor. Medicare will not accept a faxed copy of the CMN and obtaining this completed form takes a minimum of 2-4 weeks, and quite often more.

Once this is done we can proceed with the prior approval process of the equipment. There are some insurance's however that will not do a prior authorization such as Blue Cross Blue Shield. Blue Cross rarely will do a prior authorization, with the exception being if the patient has a case manager with Blue Cross. Another exception in the approval process is Medicare. Medicare only allows prior authorizations to be done in certain situations where specific criteria are met. In the situation where a prior authorization is unable to be obtained a patient authorization form will be sent to the client to secure funding in the event their insurance denies the equipment.

In order to assist you in knowing how long your order is going to take we are going to list average timelines to show you how long "an average" order will take from time of evaluation until delivery of the equipment. Please understand that these timelines are only averages and should not be construed as an exact time frame for all orders. The current average timeline for an order is 120 days.

STEP:

APPROX. TIME TO COMPLETE STEP:

1)	Evaluation complete, Therapist to do LMN, CMN & have signed by Doctor.	3 - 4 weeks
2)	LMN received, quote / prior authorization typed by CSA, sent to insurance	3 - 7 days
3)	Insurance approves the order. Order reviewed by WSS for quality assurance & reimbursement.	1 - 5 weeks
4)	Order entered into Wheelchair Seating's computer & sent to purchasing to be ordered	3 days
5)	Order placed with manufacturer	3 days
6)	Order received from manufacturer	2 - 6 weeks
	(some orders such as custom equipment may take 12 weeks. Custom seating takes an additional	
	4 – 6 weeks in addition to the wheelchair order)	
7)	Assembly of equipment at Wheelchair Seating Service	3 - 7 days
8)	Equipment scheduled for delivery (time frame depends on availability of RTS / patient)	1 –3 weeks

We hope this helps you in understanding the process for your order and the time it will take to receive your equipment. On occasion we may ask for your assistance in speaking with your physician or insurance if we are experiencing a problem getting the LMN/CMN or approval signed. If there are no unexpected delays in the order (outside of the time frames listed) you may not hear from us until the order is ready to be scheduled for delivery, so don't worry if you haven't heard from us. Please feel free to call us at any time if you have questions or would like to know the status of your order.



We would like to THANK YOU for choosing Wheelchair Seating Service.