

Canes and Crutches Medicare/Medicaid and Insurance Guideline Information

MEDICARE:

Medicare purchases either a standard cane or a quad cane. If a replacement is needed

| Medicare will allow one every five years. Medicare will allow for a standard cane | • | |
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| Medicare will purchase either a pair of forearm crutches or underarm crutches. If a replacement is needed Medicare will allow one pair every five years. | | |
| Medicare will allow for forearm crutches | E0110 \$78.57/pr | |
| Medicare will allow for aluminum underarm crutches | • | |

MEDICAID:

Medicaid purchases either a standard cane or quad cane. If a replacement is needed Medicaid will allow one every 12 months.

| Medicaid will allow for a standard cane | E0100 \$17.91 |
|---|---------------|
| Medicaid will allow for a quad cane | E0105 \$47.58 |

Medicaid will purchase either a pair of forearm crutches or underarm crutches. If a replacement is needed Medicaid will allow one every 12 months.

| Medicaid will allow for forearm crutches | E0110 \$74.83pr |
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| Medicare will allow for underarm crutches | E0114 \$45.27/pr |

PRIVATE INSURANCE:

We do provide insurance verification before setup. Insurance verification is never a guarantee of payment to FHME. Every individual has different coverage depending on his/her insurance plan. We do our best to inform you about what we are able to find out. However, it is your responsibility to know and understand your policy provisions, as you are financially responsible to FHME.

In order to bill your insurance we must first have a prescription and your insurance information.



