

Patient Lift Allowables Medicare/Medicaid and Insurance Guideline Information

MEDICARE:

Medicare allows for a patient lift (hoyer) when a patient requires transfer between bed and a chair, wheelchair, or commode, and without the use of a lift the patient would be confined to bed.

Medicare rents the patient lift for 13 months at which time it becomes patient owned. This is a “capped rental”.

Medicare allows for a patient liftE0630 months1-3 \$106.98 months 4-13 \$80.24

After the patient lift is patient owned a sling or seat may be covered as a replacement item. These are taken “non-assigned” meaning the patient pays for the sling in full and Medicare may reimburse the patient up to 80% of the Medicare allowable.....E0621 \$88.35

** Note that most Medicare replacement policies carry a patient co-pay*

MEDICAID:

A Patient lift (Hoyer) requires a prior approval from Medicaid. This will take about 30 days to receive. If approved, Medicaid will pay for the lift as a rental item for up to 10 months at which time the lift becomes patient owned.....(monthly) E0630 \$101.89

PRIVATE INSURANCE:

We provide insurance verification before setup. This never guarantees payment to THC. It is your responsibility to know your policy terms as every plan has different coverage. You are financially responsible to THC. Some plans have negotiated pricing.

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