POLICY DETERMINATION



Blue Cross Blue Shield Blue Care Network of Michigan

Nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association

*Current Policy Effective Date: 5/1/25 (See policy history boxes for previous effective dates)

Title: Knee Scooters—Crutch Substitute

Brief Description of Service:

Knee scooters (also called knee walkers, roll abouts, or non-weight bearing scooters) are an alternative to crutches for below the knee injuries. The knee scooter is a steerable, kneeling scooter which comfortably supports an injured limb and is propelled using the good leg.

Crutches are usually designed with a weight restriction that makes them unsafe for use with heavier patients, this is less of an issue with the knee scooters, as these are typically designed to accommodate a wider range of users. Crutches require arm strength whereas knee scooters could be the best approach for the aged individual or those with upper-body limitations. This can encourage users to get around more, due to the ease and effortless nature of a scooter.

Crutches can also be difficult to use in inclement weather. The rubber-feet can be slick on certain types of terrain, and ice can make moving dangerous. The basic design of the scooter allows its use in all types of climates and weather conditions, this can equate to a reduced risk of slips and falls for many people.

A knee scooter is a solution to keeping an injured leg non-weight bearing. Its main goal is to provide the body support and stability which standard crutches would offer.

Recommendation:

The knee scooter or crutch substitute is established for individuals with below the knee injuries as an alternative to standard crutches. Code E0118 should be made payable.

CPT/HCPCS Level II Codes (Note: The inclusion of a code in this list is not a guarantee of coverage. Please refer to the medical policy statement to determine the status of a given procedure.)

Established codes:

E0118

Other codes (investigational, not medically necessary, etc.):

N/A

References: N/A

Joint Blue Cross/BCN Medical Policy History

Policy Effective Date	Blue Cross Signature Date	BCN Signature Date	Comments
5/1/22	2/15/22		Joint policy determination established.
5/1/23	2/21/23		Routine policy maintenance, no change in policy status. (ds)
5/1/24	2/20/24		Routine policy maintenance, no change in policy status. Vendor managed: Northwood (ds)
5/1/25	2/18/25		Routine policy maintenance no change in status. Vendor managed: Northwood (ds)

Next Review Date: 1st Qtr. 2026