To qualify for a wheelchair seat cushion, an individual must have a manual wheelchair or a power wheelchair with a sling/solid seat/back which meets Medicare coverage criteria along with a physician’s prescription.

In addition, the individual must meet the following criteria:

- Client has a current pressure ulcer
- OR
- Past history of a pressure ulcer on the area of contact with the seating surface as reflected in a Group 1 Diagnosis Code
- OR
- Client has either of the following:
  1. Absent or impaired sensation in the area of contact with the seating surface
  2. Inability to carry out a functional weight shift as reflected in a Group 2 Diagnosis code

If any of these criteria are met, the wheelchair cushion recommended is:

- Skin Protection Wheelchair Cushion
  - Includes codes: E2603, E2622, E2623

If the individual does not meet any of the criteria, the wheelchair cushion recommended is:

- General Use Wheelchair Cushion

No VARILITE product offerings in this category at this time.

Recommended Products:
- Evolution™
- Zoid™
- Reflex™
- Junior Cushion
- Meridian™
- Meridian Wave™
- Evolution Wave™
- Proform NX™