

# Wheelchair, Electric Scooter, Walker Use

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## Wheelchair Use



None

**Americo** if more than 12 months since required use  
**Royal Neighbors** if temporary due to injury

**Aetna, Aflac, Corebridge** and **Living Promise** decline

|                                     |   |
|-------------------------------------|---|
| <b>Aetna</b>                        | Decline   |
| <b>Aflac</b>                        | Decline   |
| <b>Americo</b>                      | Decline if use of a wheelchair or mobility scooter has been required in the last 12 months                              |
| <b>Living Promise</b>               | Decline if currently using  |
| <b>Royal Neighbors</b>              | Decline unless temporary due to injury  |
| <b>Corebridge</b>                   | Decline if currently using  |
| <b>TransAmerica</b>                 | Decline if required in the last 12 months excluding temporary use after surgery or injury not to exceed 3 months' time  |
| <b>Prudential</b>                   | Decline if currently requiring a wheelchair or electric scooter due to an ongoing illness, medical condition or disease |
| <b>American Amicable/Occidental</b> | Decline if currently confined to a wheelchair due to a chronic illness or disease                                       |
| <b>GTL</b>                          | Not specifically mentioned  |