

## WHEELCHAIRS AND SPECIAL MOBILITY AIDS

- 1. REASON FOR ISSUE:** This Veterans Health Administration (VHA) Handbook updates Department of Veterans Affairs (VA) VHA procedures for providing wheelchairs and special mobility devices to veteran beneficiaries.
- 2. SUMMARY OF CHANGES:** This VHA Handbook updates current procedures.
- 3. RELATED ISSUES:** VHA Directive 1173, and VHA Handbooks 1173.1 through 1173.15.
- 4. RESPONSIBLE OFFICE:** The Chief Consultant, Prosthetic and Sensory Aids Service Strategic Healthcare Group (113), is responsible for the contents of this VHA Handbook. Questions may be referred to 202-273-8515.
- 5. RESCISSIONS:** VHA Manual M-2, Part IX, Chapter 12 is rescinded.
- 6. RECERTIFICATION:** This document is scheduled for recertification on or before the last working day of July 2005.

Thomas L. Garthwaite, M.D.  
Under Secretary for Health

Distribution: **RPC: 0005**  
FD

Printing Date:

**CONTENTS**

**WHEELCHAIRS AND SPECIAL MOBILITY AIDS**

<b>PARAGRAPH</b>	<b>PAGE</b>
1. Purpose .....	1
2. Scope .....	1
3. Classification of Commercial Source Wheelchairs .....	2
4. Guidelines for Issuing Wheelchairs .....	3
5. Spare Wheelchairs .....	4
6. Wheelchair Replacement .....	5
7. Repairs .....	5

## WHEELCHAIRS AND SPECIAL MOBILITY AIDS

### 1. PURPOSE

This Veterans Health Administration (VHA) Handbook establishes uniform and consistent national policy and procedures in providing wheelchairs and special mobility aids to veteran beneficiaries.

### 2. SCOPE

a. An initial determination of the appropriate type of wheelchair to be furnished to eligible beneficiaries is defined in Handbook 1173.1, and is subject to the provisions of this Handbook.

b. Basic wheelchairs may be permanently issued or loaned at the discretion of the prescribing physician or Prosthetic representative. This decision will be based on the nature of the veteran's disability, the length of time the wheelchair will be required and the economic factors effecting recovery of the item. Ward property wheelchairs, when available, will generally be loaned by other than Prosthetic personnel for leave periods or weekend passes. However, the Prosthetics Service may loan reclaimed wheelchairs for this purpose when necessary.

c. All wheelchairs will be prescribed as far in advance of discharge as possible. Local medical center policies should stress the importance of early prescription to ensure adequate time for delivery and patient education in use and maintenance. If the prescribing physician is unfamiliar with the wheelchair requirements of the patient, the request should be referred to Physical Medicine and Rehabilitation Service, Spinal Cord Injury Service or the Prosthetics Representative to ensure that all possible modifications are considered in developing an appropriate prescription to meet the medical and physical requirements of the patient. Unless it is contraindicated by the veteran's size, physical condition, or medical condition, beneficiaries who are permanently confined to a wheelchair will be given a choice of style and colors of wheelchairs available, including the choice of manufacturer, under existing Department of Veterans Affairs (VA) contracts. The existence or non-existence of a Blanket Purchase Agreement in a particular Veterans Integrated Service Network (VISN), or other cost-saving incentives, will not affect the beneficiary's freedom of choice. This provision applies to all wheelchairs furnished to a beneficiary (primary, spare, sports-model, handcycle, replacements, etc.).

d. All wheelchairs for use by eligible beneficiaries will be purchased from current VA contracts using established procedures. Local sources should only be used in emergency situations where the time required for delivery would create a severe hardship for the veteran. *NOTE: A facility's Major Medical and Special Equipment Committee may approve the issuance of non-contract wheelchairs in specific cases when deemed appropriate.*

e. Non-contract wheelchairs, which cost in excess of \$1,000 or experimental-type wheelchairs, must be referred to Prosthetic Program officials in VHA Headquarters in accordance with existing policy and procedures.

f. All Prosthetic activities should maintain a stock of basic wheelchairs and the more frequently prescribed custom wheelchairs with the most common modifications for immediate issue. The number and type of wheelchairs to be stocked will be based on the needs of the facility as determined by an internal review and analysis of previous issues.

g. Whenever possible, reclaimed wheelchairs that have been restored will be reissued. Wheelchairs that cannot be economically repaired and reissued will be turned in to the Acquisition and Materiel Management Service, or other appropriate service for disposition.

### 3. CLASSIFICATION OF COMMERCIAL SOURCE WHEELCHAIRS

Commercial source wheelchairs may be classified as follows:

a. **Amputee Wheelchair.** A commercially manufactured wheelchair in which the rear axles are offset further to the rear to shift the center of gravity for greater weight balance or stability, thereby compensating for the loss of the lower extremities.

b. **Basic Wheelchair.** A manual wheelchair with 8 inch front wheels and usually 24 inch hard rubber rear wheels but with minimal modification possibilities. Add-on elevating leg rest and amputee adapters are available from commercial sources. This is a very basic and inexpensive wheelchair that should be stocked at each medical center and outpatient clinic in suitable quantities to satisfy immediate needs.

c. **Custom Wheelchair.** A wheelchair produced on the assembly line in accordance with a prescription which requires structural changes, e.g., increased or decreased, width, depth, height, etc.

d. **Lightweight or Ultralite Wheelchair.** Any wheelchair constructed of aluminum, titanium, plastic, or other light weight material, etc. These wheelchairs may fold or have rigid frames. Numerous colors are available as well as optional choices in front rigging and front and rear wheels.

e. **Manual Wheelchair.** Wheelchairs that are propelled by hand.

f. **Motorized Wheelchair.** Any wheelchair modified to be self-propelled by the use of an electric motor. It is designed to compensate for a patient's inability to use a manual wheelchair. Batteries and a battery charger are necessary components.

f. **Scooters or Carts (3 or 4 wheel).** Any electrically-motorized mobility device for use by persons who require a wheelchair, but not of conventional wheelchair configuration.

g. **Sports Model Wheelchair.** Any wheelchair which is specifically built for sports activities, e.g., basketball, track, tennis, handcycle, or handbike, etc.

h. **Stock Wheelchair.** A chair available from a manufacturer not requiring modification, but

including special features, e.g., removable arms, elevating leg rests, adjustable height and back, one-arm drive, etc. It may vary in size and weight.

#### 4. GUIDELINES FOR ISSUING WHEELCHAIRS

a. **Basic or Stock Wheelchair.** May be considered for veterans when the disability requires a wheelchair but the veteran has retained the ability to stand and transfer, or has a disability of a temporary nature and no special features or modifications are required to accommodate physical condition or size.

b. **Lightweight or Ultralite Wheelchairs.** May be considered for eligible veterans meeting the criteria for normal wheelchairs. Special attention is generally required when prescribing ultralite wheelchairs. Unique modifications in height of seat and back, angle of seat, back, and footrests and in the wheel chamber are essential elements for users of ultralite wheelchairs. Care should be exercised to ensure that the veteran's physical condition does not contraindicate the use of this type of wheelchair on a daily basis.

c. **Motorized Wheelchairs.** May be considered for veterans who have a disability resulting in the loss or loss of use of both lower extremities, combined with a loss, or loss of use, or severe impairment of at least one upper extremity to the extent that it is medically determined that the veteran is incapable of satisfactorily propelling a manual wheelchair. Motorized wheelchairs may also be considered for eligible veterans who suffer from severe chronic obstructive pulmonary disorder, multiple sclerosis, spinal cord injury, stroke, amputations, degenerative joint disease, rheumatoid arthritis, and/or those veterans diagnosed with severe cardiovascular disease. *NOTE: Review and approval by the Major Medical Equipment Committee, local Wheelchair Committee, or physician who specializes in rehabilitation medicine is recommended.*

(1) In those cases where a veteran has sufficient residual strength in one or both upper extremities, careful consideration should always be given to the various accessories and modifications available for mechanical wheelchairs that are designed to assist patients with impairment of one or both upper extremities, e.g., one-arm drive, special hand rims, etc. It is of the utmost importance, and in the best interest of the veteran, that the veteran utilize any residual function remaining in the upper extremities for as long as possible. However, even if sufficient strength remains in one or both upper extremities, a motorized wheelchair may still be medically indicated and provided.

(2) If a motorized wheelchair is prescribed, the physician must determine that the veteran has retained sufficient strength and control to operate the chair safely without danger to himself or others and that it is feasible for the veteran to operate the motorized wheelchair at home and/or in the environment in which the chair is to be used. If necessary, a visit may be made by the Prosthetic representative and/or Physical Medicine and Rehabilitation therapist to assess the environment in which the chair is to be used. Motorized wheelchairs may not be prescribed to be used as a vehicle or to make life outside the hospital more accessible.

d. **Scooters or Carts (3 or 4 wheels).** May be considered for those veterans who have a disability resulting in the loss of endurance required to operate a manual wheelchair at home and/or in the environment in which the scooter or cart is to be used. The veteran must be able to independently transfer onto and off the scooter or cart to a chair or into an automobile or van. These are most often veterans who have been diagnosed with a disease which may be exacerbated by the exertion of normal ambulation or the use of a manual wheelchair, i.e., hypertensive cardiovascular disease (HCVD), multiple sclerosis, chronic obstructive pulmonary disorder, coronary artery disease, etc. Scooters or carts may not be prescribed to be used as a vehicle or to make life outside the hospital more convenient. Each case should be reviewed by the local Wheelchair Committee or the Major Medical Equipment Committee. When this device is approved, consideration will be given for the appropriate equipment.

e. **Sport Model Wheelchairs.** A Sport Model Wheelchair may be considered for eligible veterans who have a disability resulting in the anatomical loss or loss of use of at least one lower extremity which prohibits their participation in normal sports activities. It must be determined that the veteran is actively engaged in a sports activity which requires a specially designed sports wheelchair for attainment of maximum rehabilitation. One sport model wheelchair may be furnished in addition to the regular allotment for a veteran who requires the continued use of a wheelchair for mobility. The request should be approved by the Major Medical Equipment Committee, local Wheelchair Committee or by a physician who specializes in rehabilitation medicine.

(1) Sport model wheelchairs may be furnished to eligible veterans in lieu of a conventional-type chair, even if the veteran is not actively engaged in a sports activity, provided the unique modifications in height, depth and width contained in the sport chair are appropriate for the veteran's physical condition and there are no contraindications for daily use.

(2) Replacement of sports model wheelchairs may not be authorized merely because a veteran desires a new model or type, or solely because a chair has been used for a particular length of time.

f. **Handcycles.** May be furnished under the provisions for wheelchair issuance. Handcycles will be issued to eligible beneficiaries as exercise equipment under the provisions of Handbook 1173.8(4)(j)(1)(2) when prescribed as such.

## **5. SPARE WHEELCHAIRS**

a. Veterans eligible for outpatient services who require the constant and continued use of a wheelchair are to be furnished a second manual wheelchair of equal quality when the prescribing physician and/or Prosthetic representative have established that the absence of a manual wheelchair during repair periods would create a severe hardship. If a spare wheelchair is considered appropriate, responsibility for procurement will be with the prescribing facility.

b. Spare motorized wheelchairs may be furnished when an unusual circumstance occurs. In such cases, all pertinent facts and complete medical justification will be assembled and

forwarded to the local Wheelchair Clinic or Major Medical Equipment Committee for determination.

c. The issuance of a manually propelled wheelchair should be considered for all outpatients who have been furnished a motorized wheelchair where the limitations of use, time required for repairs and, other circumstances create a severe hardship for the veteran.

d. Spare wheelchairs should not be issued to long-term hospitalized inpatients or patients confined to a VA Nursing Home, Community Nursing Home or a State Veterans Home.

## **6. WHEELCHAIR REPLACEMENT**

a. Replacement wheelchairs may be authorized without personal examination of the patient and/or the wheelchair if the Prosthetic representative has sufficient knowledge of the case to determine that there are no new medical problems and one of the following conditions exists:

(1) The type of wheelchair in use no longer meets the patient's requirements or medical needs.

(2) The repair costs exceed one-half of the replacement costs.

(3) Loss or destruction was due to circumstances beyond the control of the veteran. If negligence or willful action is established, the local Chief Medical Officer will determine whether a replacement may be issued, dependent upon the circumstances. Prosthetic Program officials in VHA Headquarters may be consulted for an opinion.

b. In those instances where the wheelchair prescription has changed and the wheelchair in the patient's possession is still serviceable and not intended to be used as a spare, the Prosthetic Service will recover the chair for reissue.

c. Replacement wheelchairs may not be authorized merely because a new model is manufactured or solely because a wheelchair has been in use for a particular length of time.

## **7. REPAIRS**

a. Repairs may be obtained through local sources on authority of VA Forms 10-2501, Prosthetic Service Card (PSC), VA Form 10-2421 (ADP), Prosthetic Authorization for Items or Services, or through local VA repair facilities.

b. Wheelchairs should be repaired if the cost of the repair is less than one-half the cost of replacement. The Prosthetic representative, or designee, will determine whether it is more practical, from an economical standpoint, to repair or replace the wheelchair. In cases of substantial repairs, the wheelchair should be shipped or delivered to the respective health care facility for inspection; or arrangements will be made for a repair shop to furnish a complete assessment or repair estimate before approval of repair is granted.

c. The expense of a wheelchair repair incurred without prior authorization for a veteran with a

service-connected disability or a veteran with other continuing eligibility, may be paid or furnished on the basis of a timely filed claim, if:

(1) Obtaining the repairs locally was necessary, expedient, and not a matter of preference to using authorized sources, and

(2) It is determined that the costs were excessive or unreasonable. ***NOTE:** If it is determined that the costs were excessive or unreasonable, the claim may be allowed to the extent the costs were deemed reasonable, and the remainder was disallowed.*

d. Expense for damages to wheelchairs that were intentional or caused by negligence will be the responsibility of the veteran or beneficiary.

e. Eligible beneficiaries will be issued a PSC upon initial issue of the wheelchair. The PSC pre-authorizes repairs to the wheelchairs listed thereon, not to exceed the current dollar limitation. Repairs exceeding this limitation may be approved by telephone with a follow-up repair authorization by the designee's Prosthetics Representative. ***NOTE:** Use Form Letter (FL) 10-55, Authorization to Repair Prosthetic Appliance.*