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, Prosthetic and Sensory Aids Service Strategic Healthcare Group, VHA Handbooks 1173.01 through 1173.05, and VHA Handbooks 1173.07 through 1173.15.

4. RESPONSIBLE OFFICE. The Chief Prosthetics and Clinical Logistics Officer (10FP), is responsible for the contents of this VHA Handbook. Questions may be referred to (202) 254-0440.

5. RESCISSIONS. VHA Handbook 1173.6, Wheelchairs and Special Mobility Aids dated October 30, 2000, is rescinded.

6. RECERTIFICATION. This VHA Handbook is scheduled for recertification on or before the last working day of January 2013.

Michael J. Kussman, MD, MS, MACP
Under Secretary for Health

DISTRIBUTION: CO: E-mailed 1/16/2008
FLD: VISN, MA, DO, OC, OCRO, and 200 – E-mail 1/16/2008
## CONTENTS

**WHEELCHAIRS AND SPECIAL MOBILITY AIDS**

<table>
<thead>
<tr>
<th>PARAGRAPH</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Purpose</td>
<td>1</td>
</tr>
<tr>
<td>2. Scope</td>
<td>1</td>
</tr>
<tr>
<td>3. Classification of Commercial Source Wheelchairs</td>
<td>2</td>
</tr>
<tr>
<td>4. Guidelines for Issuing Wheelchairs</td>
<td>3</td>
</tr>
<tr>
<td>5. Spare Wheelchairs</td>
<td>4</td>
</tr>
<tr>
<td>6. Wheelchair Replacement</td>
<td>4</td>
</tr>
<tr>
<td>7. Repairs</td>
<td>5</td>
</tr>
</tbody>
</table>
WHEELCHAIRS AND SPECIAL MOBILITY AIDS

1. PURPOSE

This Veterans Health Administration (VHA) Handbook establishes uniform and consistent Department of Veterans Affairs (VA) procedures for providing wheelchairs and special mobility aids to VA beneficiaries.

2. SCOPE

NOTE: The initial determination of eligibility for the provision of wheelchairs is defined in Handbook 1173.01, Eligibility, Title 38 United States Code (U.S.C.) 1710, and Title 38 Code of Federal Regulations (CFR) 17.150 and is subject to the provisions of this Handbook.

a. Wheelchairs may be permanently issued or loaned at the discretion of the prescribing physician or Prosthetic Representative. This decision is based on the nature of the veteran's disability, the cost of the wheelchair, and the length of time the wheelchair will be required. Facility property wheelchairs, when available, are generally 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.

b. All wheelchairs are to be prescribed as far in advance of discharge as possible. Local medical center policies need to stress the importance of early prescription to ensure adequate time for delivery and patient education in its use and maintenance. If the prescribing physician is unfamiliar with the wheelchair requirements of the patient, the request needs to be referred to Physical Medicine and Rehabilitation Service (PM&RS), Spinal Cord Injury (SCI) 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 are to be given a choice of style and colors of wheelchairs available, including the choice of manufacturer, under existing VA contracts.

NOTE: The existence or non-existence of a Blanket Purchase Agreement in a particular Veterans Integrated Service Network (VISN), or other cost-saving incentives, does not affect the beneficiary's freedom of choice. This provision applies to all wheelchairs furnished to a beneficiary (primary, spare, sports-model, hand cycle, replacements, etc.)

c. All wheelchairs for use by eligible beneficiaries must be purchased from current VA contracts using established procedures unless customized wheelchairs are needed to meet unique patient needs as with SCI.

d. Unusual requests or experimental-type wheelchairs must be referred to Prosthetic Program officials in VHA Central Office in accordance with existing policy and procedures.

e. All Prosthetic activities need to 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 is to be based on the needs of the facility, as determined by an internal review and analysis of previous issues.

f. Whenever possible, reclaimed wheelchairs that have been restored are to be reissued and/or provided as a ward chair. Wheelchairs that cannot be economically repaired and reissued must 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 are classified as follows:

a. **Amputee Wheelchair.** An Amputee Wheelchair is 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 basic wheelchair is a manual wheelchair with 8 inch front wheels and usually 24 inch hard rubber rear wheels but with minimal modification possibilities. It is a basic, inexpensive wheelchair that needs to be stocked at each medical center and outpatient clinic in suitable quantities to satisfy immediate needs.

c. **Custom Wheelchair.** A custom wheelchair is a wheelchair produced on the assembly line in accordance with a prescription, which requires structural changes and specialized seating requirements, e.g., increased height.

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

e. **Manual Wheelchair.** A manual wheelchair is a generic term for wheelchairs that are propelled by hand.

f. **Pushrim-Activated Power-Assist Wheelchairs (PAPAW).** PAPAWs require users to stroke the hand rims to activate small, lightweight motors, which then drive the wheels for a brief period of time (seconds). To keep a PAPAW moving, users must continue to stroke the hand rims as they would if they were propelling standard manual wheelchairs.

g. **Motorized Wheelchair.** A motorized wheelchair is 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. **NOTE:** Batteries and a battery charger are necessary components.

h. **Enhanced Function Power Wheelchairs.** The term “enhanced function power wheelchair” refers to power wheelchairs with augmented capacities such as the ability to change the user’s vertical position in space (elevate, go low to ground), stand, access multiple inhospitable terrains, and/or climb stairs.
i. **Scooters (3 or 4 wheel).** Three or four wheel scooters are any electrically-motorized mobility device guided by a tiller with limited seat modification capabilities for use by persons who are unable to propel a manual wheelchair, but who retain the ability to independently transfer onto and off of the device. Scooters are for patients who are able to negotiate their home environment without powered mobility, but who require powered mobility outside the home.

j. **Sports Model Wheelchair.** A sports model wheelchair is any wheelchair which is specifically built for sports activities, e.g., basketball, track, tennis, etc. Handcycles or handbikes fall into this category.

k. **Stock Wheelchair.** A stock wheelchair is a wheelchair available from a manufacturer not requiring modification, but includes 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.** A basic or stock wheelchair may be considered for VA beneficiaries 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. No special features or modifications are required for this wheelchair to accommodate physical condition or size.

b. **Lightweight or Ultralite Wheelchairs.** Lightweight or ultralite wheelchairs may be considered for eligible veterans meeting the criteria for normal wheelchairs; however, special attention is required when prescribing an ultralite wheelchair. 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 needs to 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. **Sport Model Wheelchairs.** A sport model wheelchair may be considered for eligible VA beneficiaries 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 VA beneficiary 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 VA beneficiary who requires the continued use of a wheelchair for mobility. The request needs to 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.
d. **Hand Cycles.** Hand cycles may be furnished under the same provisions as for sport model wheelchairs.

e. **Motorized Wheeled Mobility Devices.** Clinical practice recommendations for scooters, PAPAWs, power wheelchairs, power wheelchairs with enhanced function, and iBOT® motorized devices can be found under the Prosthetic Clinical Management Program (PCMP) link at: [http://vaww.pclo.med.va.gov](http://vaww.pclo.med.va.gov)

**NOTE:** As new and emerging wheelchair technology becomes available, which requires patient referrals to specialized evaluation sites, the referral sites are responsible for the cost of the device once it has been recommended by the evaluation team and authorized by VHA Central Office through the submission of VA Form 10-2641, Authority for Issuance of Special and/or Experimental Appliances. The VA Form 10-2641 is to be prepared by the referral site with all applicable supportive documentation and evaluation results prepared by the evaluation site (e.g. iBOT®).

### 5. SPARE WHEELCHAIRS

a. Veterans who are eligible for outpatient services and 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 is 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 must be forwarded to the local Wheelchair Clinic or Major Medical Equipment Committee for determination.

c. The issuance of a manually-propelled wheelchair needs to 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.

### 6. WHEELCHAIR REPLACEMENT

**NOTE:** 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.

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 repair costs exceed one-half of the replacement costs.

2. Loss or destruction was due to circumstances beyond the control of the veteran. If negligence or willful action is established, the local Prosthetic Representative determines whether a replacement may be issued, dependent upon the circumstances. **NOTE:** Prosthetic
Program officials in VHA Central Office may be consulted for an opinion.

b. When a wheelchair no longer meets the patient's needs due to change in medical condition, the patient is required to obtain a new prescription through PM&RS or SCI.

c. 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 must recover the chair for reissue.

7. REPAIRS

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

b. Wheelchairs need to be repaired if the cost of the repair is less than one-half the cost of replacement. The Prosthetic Representative, or designee, determines whether it is more practical, from an economical standpoint, to repair or to replace the wheelchair. In cases of substantial repairs, the wheelchair needs to be shipped or delivered to the respective health care facility for inspection; or arrangements must be made for a repair shop to furnish a complete assessment or repair estimate before the 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 over using authorized sources; and

(2) It is determined that the costs were not 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 disallowed.

d. Expense for damages to wheelchairs that were intentional or caused by negligence are the responsibility of the VA beneficiary.

e. Eligible beneficiaries are issued a PSC upon initial issue of the wheelchair. The PSC pre-authorizes repairs to the specific wheelchairs listed on it, not to exceed the current dollar limitation. Repairs exceeding this limitation may be approved by telephone with a follow-up repair authorization by the VA beneficiary’s Prosthetics Representative. **NOTE:** Form Letter (FL) 10-55, Authorization to Repair Prosthetic Appliance, may be used for this purpose.

**NOTE:** Repairs and/or replacements for wheelchairs not furnished by a facility will be provided once a patient is enrolled at the new referral facility. Prosthetic staff is required to input the item(s) to be repaired into the patient’s VA Form 10-2319, Record of Prosthetic Services, as historical data for tracking purposes. If a replacement is deemed necessary, follow procedures outlined in paragraph 6.