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Disability Services Beacon

Information and Resources from the
Fairfax Area Disability Services Board

Everything You Need to Know about Wheelchairs

Wheelchairs are vehicles to freedom, independence, and life in the community. This issue of the *Disability Services Beacon* covers the basics of what most users need to know about the different kinds of wheelchairs, what to consider when getting a wheelchair, and how to get and pay for one.

Wheelchairs are either manual or electric. Manual wheelchairs are lighter than electric chairs and require physical force to move them, although they can often be customized so as to require the least amount of force. Electric wheelchairs are heavier

because their motors provide the power from large rechargeable batteries.

Wheelchairs must be customized to fit their users' needs. They are expensive, costing anywhere from several hundred dollars to as much as a new car. Many wheelchair purchases are financed through Medicare or Medicaid, so what follows is primarily applicable to Medicare and Medicaid and can vary for private insurance carriers.

Wheelchairs as Medical Equipment

A wheelchair is a piece of durable medical equipment. Consequently, getting a wheelchair usually starts with a written prescription from a physician, a physician's assistant, a nurse practitioner, clinical nurse specialist, or other medical specialist. Medicare and other carriers require a face-to-face evaluation of the person and a report on the relationship between the user's mobility needs and the specific wheelchair recommended.

In most cases, Medicare, Medicaid and private insurance require documentation of mobility difficulties sufficient to impair participating in activities of daily living—activities such as toileting, feeding, dressing, grooming, and bathing—to authorize payment.

In addition to documenting physical limitations that prevent normal mobility in activities of daily living, insurance also require that the prescription or supporting clinical information contain information on the user's mental and physical capabilities to safely and adequately use the wheelchair; the suitability of the user's home environment for a wheelchair; and the user's willingness to use the wheelchair routinely. This information should be included in the written prescription.

Some of the issues that must be considered when choosing a wheelchair include:

- Where it will be used and for how much of the day it will be used ;
- Any space limitations;

- How the user will get in and out of the wheelchair;
- The user's strengths and needs, both physical and intellectual.

The supporting clinical documentation can be any pertinent parts of the individual's medical record to support the medical necessity for a wheelchair. These may include a medical history, physical examination, diagnostic tests, and summaries of findings, diagnoses, and treatment plans. As of April 2006, the Centers for Medicare and Medicaid Services no longer require a "Certificate of Medical Necessity." A written prescription and supporting clinical documentation is now considered sufficient.

Fitting and Ordering a Wheelchair

The treating medical practitioner sends a written prescription and supporting clinical information to a vendor/supplier of durable medical equipment. Some durable medical equipment vendors have credentials through either the Rehabilitative Engineering Society of North America (RESNA;

www.resna.org) or the National Registry of Rehabilitation Technology Suppliers (NRRTS; www.nrrts.org) as Rehabilitation Technology Suppliers, which means that they have additional training on wheelchair features and capabilities and a high level of professionalism.

Vendors must be enrolled in Medicare and have a Medicare supplier number in order for Medicare to reimburse them. Without a supplier number, Medicare will not pay. Additionally, the vendor should be a participating supplier in the Medicare program, which means the vendor will accept “assignment,” that is whatever Medicare authorizes for payment. If the enrolled vendor is not a participating supplier, the user will have to pay anything over and above the Medicare authorized amount.

In the case of Medicaid eligible users, the vendor must be licensed or certified by the Virginia Department of Medical Assistance Services (DMAS), and have a signed participation agreement and a provider identification number. An additional consideration for Medicaid in Virginia

involves pre-authorization. Generally, manual wheelchairs do not require pre-authorization. However, because of the complexity and cost involved, power wheelchairs do require pre-authorization to validate the medical necessity for the wheelchair and that it meets the DMAS criteria for reimbursement. The pre-authorization request is made by the enrolled supplier and submitted to the DMAS pre-authorization contractor. Virginia Medicaid will not pay if pre-authorization is required but not obtained.

In the past, medical practitioners requested independent seating and sizing evaluation by either a licensed occupational or physical therapist in order to determine exactly what type of wheelchair would best meet their patients' needs. However, new regulatory guidance enables any medical practitioner who is qualified to do so to send the prescription directly to the enrolled supplier without first getting a seating and sizing evaluation. However, individual medical practitioners may still prefer that their patients get a seating and sizing evaluation. Two local sites for

such evaluations are Inova Mount Vernon Hospital and National Rehabilitation Hospital, listed below.

Sources for more information about Medicare and Medicaid, and private insurance, at the federal, state, and local levels are listed below.

Contact Information

Centers for Medicare and Medicaid Services

1-800-MEDICARE (1-800-633-4227)

TTY 1-877-486-2048

www.cms.hhs.gov

www.medicare.gov

Inova Mount Vernon Hospital

Inova Rehabilitation Center

703-664-7190

www.inova.org

National Rehabilitation Hospital

Seating and Mobility Clinic

202-877-1000

www.nrhrehab.org

**Virginia Department of Medical Assistance
Services (DMAS)**

1-804-786-7933

www.dmas.virginia.gov

**Virginia Insurance Counseling and Assistance
Program (VICAP)**

703-324-5851

TTY 703-449-1186

www.fairfaxcounty.gov/aaa/vicap.htm

Lemon Law for Assistive Devices

In 1998, the General Assembly passed the Virginia Assistive Technology Device Warranties Act. The act is essentially a “lemon law” that protects consumers of assistive technology, including wheelchairs. The law is similar to the one that applies to motor vehicles with problems that affect their use, safety, or value, and guarantees the same protections to people who use assistive devices.

Disability Services Beacon

According to the law, an assistive technology device includes any new device, including a demonstrator, that a consumer purchases, or accepts transfer of in Virginia, that is used for a major life activity, or any other assistive device that enables a person with a disability to communicate, see, hear, or maneuver. These devices include

- Manual wheelchairs, motorized wheelchairs, motorized scooters, and other aids that enhance the mobility of an individual;
- Hearing aids, telephone communication devices for the deaf (TTD/TTY), assistive listening devices, visual and audible signal systems, and other aids that enhance an individual's ability to hear; and
- Voice-synthesized computer modules, optical scanners, talking software, Braille printers, and other devices that enhance an individual with a visual disability's communication.

The law requires warranties on devices and has provisions for replacement or refund for those devices that can't be repaired or need constant

repairs. The act also has requirements about the information consumers receive from manufacturers, such as how to get a replacement or refund and consumers' rights to legal action and arbitration. Furthermore, if a manufacturer resells an item, the consumer must be told the reason for the original return.

The law is in addition to any manufacturer's warranty, which generally provides for repairs at no charge during the warranty period. The law also requires that manufacturers warrant that their products are free of defects that decrease their value for one year after a customer receives the device.

The key provision of the act defines a "lemon" as a device that requires repair three times for the same or related problem within the 12 months following delivery, or is not usable for a cumulative total of 30 days without a loaner. Such a device must be replaced within 30 days, or the full purchase price must be refunded within 14 days, as must any reasonable expenses associated with

obtaining the repairs or an alternative assistive device.

Thus the assistive technology “lemon law” gives the consumer considerable protection against a chronic defect, and provides the force of law in requiring the dealer or manufacturer to act responsibly. Consumers should be aware that the Act also gives them the option of submitting disputes covered by the Act to the Dispute Resolution Unit of the Office of Consumer Affairs, Virginia Department of Agriculture and Consumer Services. Their mission is to provide protection to consumers against fraudulent, deceptive, or illegal practices in the marketplace. The bottom line is that the consumer does not have to live with the frustration and aggravation of a piece of defective equipment. More information, and the law itself, is also available from the Virginia Assistive Technology System.

Contact Information

Office of Consumer Affairs

Virginia Department of Agriculture and Consumer Services

1-800-552-9963

www.vdacs.virginia.gov/consumers/oca.html

Virginia Assistive Technology Services (VATS)

1-800-552-5019

www.vats.org

Get Weekly Disability News

Disability Services E-News is a listserv that keeps subscribers informed about resources and issues that affect people with physical and sensory disabilities.

The listserv sends out one brief e-mail each week. The listserv is the primary vehicle for publicly announcing meetings and activities of the Disability Services Board and will in the future tell

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you how to get online issues of the *Disability Services Beacon*.

To subscribe, simply go to www.fairfaxcounty.gov/email/lists/. Fill in your e-mail address, click on the box before “Disability services and news,” and then click subscribe. You will be sent an e-mail asking you to respond in order to finish subscribing. You must respond to this e-mail and write “ok” in the body to complete the subscription.

Fairfax County is committed to nondiscrimination on the basis of disability in all county programs, services, and activities. This document is available in alternative formats upon request. Please call 703-324-5421 or TTY 703-449-1186, or send an e-mail to disabilityservices@fairfaxcounty.gov. Allow 7 working days for preparation of the material.

The Next DSB Meeting is

on the second Monday
of the month, 7:30-9:30 p.m.

Government Center
12000 Gov. Ctr. Parkway
Fairfax

Meetings are open to the public; public comment, no more than 3 minutes in length, is welcome during the public comment period. For information or to request accommodations, please call 703-324-5421, TTY 703-449-1186, or send an e-mail to disabilityservices@fairfaxcounty.gov 5 working days prior to the meeting.

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