

MANUAL WHEELCHAIR QUALIFICATION CHECKLIST

Standard, Hemi and Reclining Models

- Patient weighs 250# or less
- Patient requires a wheelchair to achieve one or more MRADL's in the home

K0001

- Patient requires a 19" or greater floor to seat height **AND**

K0002

- Patient requires floor to seat height less than 19" **OR**

K0003

- Patient cannot self-propel in a standard weight model using arms and/or legs and patient can propel this level

E1226 Fully Reclining Back

- Patient spends two or more hours daily in a wheelchair **and at least one** of the following applies:
 - Patient presents with Quadriplegia
 - Patient presents with fixed hip angle
 - Patient has trunk casts or braces that requires a reclining back feature for positioning
 - Patient presents with excessive extensor tone of the trunk muscles
 - Patient needs to rest in a recumbent position two or more times during the day and transfer between bed/chair is very difficult

High Strength Lightweight Model

Each of the following applies:

K0004

- Patient requires a wheelchair to achieve one or more MRADL's in the home
- Patient requires for duration of 3 months or more
- Patient spends at least two hours per day in the wheelchair
- Patient is able to self-propel (without being pushed) in the High Strength Lightweight Wheelchair

Plus one of the following:

- Patient is not able to self-propel to achieve one or more MRADL's in a standard weight or lightweight wheelchair
- Back Height required is 19" or higher and not available on a K0001, K0002 or K0003 level chair
- Seat Depth required is 18" or more due to hip to popliteal measurement
- Floor to Seat height required is less than 15 ½" and not available on a K0001, K0002 or K0003 level chair
- Patient self propels wheelchair while engaging in frequent activities that cannot be performed in a standard or lightweight wheelchair

Ultra Lightweight Model (LCMP Assessment Suggested)

K0005

- Patient cannot perform specific MRADL's in the home without use of this level chair
- Patient's independent MRADL's require options not provided on any other level chair

Heavy Duty and Extra Heavy Duty Models

- Patient requires a wheelchair to achieve one or more MRADL's in the home **AND**

K0006

- Patient weighs more than 250# **OR**
- Patient has severe spasticity

K0007

- Patient weights more than 300#

DOCUMENTATION

- Verbal Dispensing Order is on file prior to delivery
- Detailed Order is on file prior to filing claim
- Medical Record information is on file substantiating need
- KX Modifier may be used when filing claim – medical record information substantiates need

Reviewed by: _____ Date: _____ Delivery/Billing Authorized: __Y__N

Problems identified: _____