



DETAILED WRITTEN ORDER

Homecare Dimensions

Document #: **09.DWO.HCD.06b**
Effective: **09/15/2009**

Rev.: **B**

Title: **Hospital Beds and Accessories**

Page #: **1 of 2**

Initial Date of Medical Necessity: _____

Patient Name: _____ Medicare #: _____

Address: _____ City: _____ ST: _____ Zip Code _____

Phone #: _____ Cell #: _____ DOB: _____

Email: _____ Length of Need: _____ (99 = Lifetime)

Diagnosis Code: _____

Medical records: The patient's medical record, **to be supplied with this order**, must contain sufficient documentation of the patient's medical condition to substantiate the necessity for the type and quantity of items ordered and for the frequency of use or replacement (if applicable).

Equipment Ordered: All hospital beds and accessories are billed using the specific codes listed in the Local Coverage Determination.

ORDERED	CODE	DETAILED DESCRIPTION OF ORDERED ITEMS
	E0250	Hospital bed, fixed height, with any type side rails, with mattress
	E0328	Hospital bed, pediatric, manual, 360 degree side enclosures, top of headboard, footboard and side rails up to 24 inches above the spring, includes mattress
	E0255	Hospital bed, variable height, hi-lo, with any type side rails, with mattress
	E0260	Hospital bed, semi-electric (head and foot adjustment), with any type side rails, with mattress
	E0329	Hospital bed, pediatric, electric or semi-electric, 360 degree side enclosures, top of headboard, footboard and side rails up to 24 inches above the spring, includes mattress
	E0265	Hospital bed, total electric (head, foot and height adjustments), with any type side rails, with mattress
	E0303	Hospital bed, heavy duty, extra wide, with weight capacity greater than 350 pounds, but less than or equal to 600 pounds, with any type side rails, with mattress
	E0304	Hospital bed, extra heavy duty, extra wide, with weight capacity greater than 600 pounds, with any type side rails, with mattress
	E0271	Mattress, innerspring
	E0272	Mattress, foam rubber
	E0910	Trapeze bars, a/k/a patient helper, attached to bed, with grab bar
	E0911	Trapeze bar, heavy duty, for patient weight capacity greater than 250 pounds, attached to bed, with grab bar
	E0912	Trapeze bar, heavy duty, for patient weight capacity greater than 250 pounds, free standing, with grab bar
	E0940	Trapeze bar, free standing, complete with grab bar

Treating Physician Signature: _____ Date: _____

Treating Physician Name: _____ NPI: _____

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Indications and Limitations of Coverage and/or Medical Necessity

For any item to be covered by Medicare, it must 1) be eligible for a defined Medicare benefit category, 2) be reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member, and 3) meet all other applicable Medicare statutory and regulatory requirements. For the items addressed in this medical policy, the criteria for "reasonable and necessary" are defined by the following indications and limitations of coverage and/or medical necessity.



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Claims for a Fixed Height Hospital Bed (E0250, E0328): A fixed height hospital bed is one with manual head and leg elevation adjustments but no height adjustment. A fixed height hospital bed is covered if **one** or more of the following criteria are met:
The patient has a medical condition, which requires positioning of the body in ways not feasible with an ordinary bed, **or**
The patient requires positioning of the body in ways not feasible with an ordinary bed in order to alleviate pain, **or**
The patient requires the head of the bed to be elevated more than 30 degrees most of the time due to congestive heart failure, chronic pulmonary disease, or problems with aspiration.
Pillows or wedges must have been considered and ruled out, or the patient requires traction equipment, which can only be attached to a hospital bed.

Claims for a Variable Height Hospital Bed (E0255): A variable height hospital bed is one with manual height adjustment and with manual head and leg elevation adjustments. A variable height hospital bed is covered if the patient meets **one** of the criteria for a fixed height hospital bed **and** requires a bed height different than a fixed height hospital bed to permit transfers to chair, wheelchair or standing position.

Claims for a Semi-Electric Hospital Bed (E0260, E0329): A semi-electric bed is one with manual height adjustment and with electric head and leg elevation adjustments. A semi-electric hospital bed is covered if the patient meets **one** of the criteria for a fixed height bed **and** requires frequent changes in body position and/or has an immediate need for a change in body position.

Claims for a Heavy Duty Extra Wide Hospital Bed (E0303): A total electric bed is one with electric height adjustment and with electric head and leg elevation adjustments. A heavy duty extra wide hospital bed is covered if the patient meets **one** of the criteria for a fixed height hospital bed **and** the patient's weight is more than 350 pounds, but does not exceed 600 pounds.

Claims for an Extra-Heavy Duty Hospital Bed (E0304): An extra heavy-duty hospital bed is covered if the patient meets **one** of the criteria for a hospital bed **and** the patient's weight exceeds 600 pounds.

Claims for a Total Electric Hospital Bed (E0265): A total electric hospital bed is **not** covered by Medicare.

ACCESSORIES:

Claims for Trapeze Equipment (E0910, E0940): Medical records supports the medical necessity for a Trapeze Bar if the patient needs this device to:
Sit up because of a respiratory condition; **or**,
To change body position for other medical reasons; **or**,
To get out of bed
Trapeze bars attached to a bed are noncovered when used on an ordinary bed.

Claims for Heavy-Duty Trapeze Equipment (E0911, E0912): Medical records supports the medical necessity for a Heavy-Duty Trapeze Bar if the patient's weight is more than 250 pounds.

Claims for a Replacement Mattress (E0271, E0272): Replacement mattresses will be covered if a patient's condition requires a replacement innerspring mattress or foam rubber mattress, and if the patient owns their own hospital bed.

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