Hospital Beds and Accessories

Documentation Required

❖ All insurance payers
  - Prescription
  - Medical record notes specifying medical necessity

❖ Medicare recipients
  - Written Order Prior to Delivery (WOPD), which includes all the following elements:
    ✓ Start Date
    ✓ Patient name
    ✓ Provider name
    ✓ Detailed description of item(s) prescribed
    ✓ ICD-10 code(s)
    ✓ Length of need
    ✓ Provider signature with credentials (for Medicare recipients)
    ✓ Provider signature date (in addition to start date of prescription for Medicare recipients)

❖ Medicaid recipients
  - Medicaid Certificate of Medical Necessity (may replace prescription form)

Face to Face Examination Notes Must Document

❖ Fixed height Hospital Bed
  - Height and weight within 30 days of prescription
  - One or more of the following:
    ✓ Medical condition which requires positioning of the body in ways not feasible with an ordinary bed
    ✓ Requires positioning of the body in order to alleviate pain
    ✓ Requires head of bed to be elevated more than 30 degrees most of the time due to congestive heart failure, chronic pulmonary disease or problems with aspiration
    ✓ Requires traction equipment, which can only be attached to a hospital bed

❖ Semi Electric Hospital Bed
  - Height and weight within 30 days of prescription
  - One of the criteria for a fixed height bed is met; and
  - Requires frequent changes in body position and/or has an immediate need for a change in body position (i.e a beneficiary has large or multiple pressure ulcers on the trunk or pelvis and needs to be repositioned frequently, and is unable to do so without assistance; or the beneficiary may have limited strength to move or shift their body).

❖ Fully Electric Bed
  - Not covered; the height adjustments feature is a convenience feature
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❖ **Trapeze equipment**
  - Beneficiary needs this device for one of the following reasons:
    ✓ Sit up because of a respiratory condition
    ✓ Change body position for other medical reasons
    ✓ To get in or out of bed

❖ **Bed cradle**
  - Covered when it is necessary to prevent contact with the bed coverings