



CIGNA MEDICAL COVERAGE POLICY

The following Coverage Policy applies to all plans administered by CIGNA Companies including plans administered by Great-West Healthcare, which is now a part of CIGNA.

Subject Bathroom and Toilet Equipment and Supplies

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Table of Contents

Coverage Policy	1
General Background	2
Coding/Billing Information	3
References	4
Policy History	5

Hyperlink to Related Coverage Policies

Seat Lift Mechanisms, Patient Lifts and Standing Devices

INSTRUCTIONS FOR USE

Coverage Policies are intended to provide guidance in interpreting certain **standard** CIGNA HealthCare benefit plans as well as benefit plans formerly administered by Great-West Healthcare. Please note, the terms of a participant's particular benefit plan document [Group Service Agreement (GSA), Evidence of Coverage, Certificate of Coverage, Summary Plan Description (SPD) or similar plan document] may differ significantly from the standard benefit plans upon which these Coverage Policies are based. For example, a participant's benefit plan document may contain a specific exclusion related to a topic addressed in a Coverage Policy. In the event of a conflict, a participant's benefit plan document **always supercedes** the information in the Coverage Policies. In the absence of a controlling federal or state coverage mandate, benefits are ultimately determined by the terms of the applicable benefit plan document. Coverage determinations in each specific instance require consideration of 1) the terms of the applicable group benefit plan document in effect on the date of service; 2) any applicable laws/regulations; 3) any relevant collateral source materials including Coverage Policies and; 4) the specific facts of the particular situation. Coverage Policies relate exclusively to the administration of health benefit plans. Coverage Policies are not recommendations for treatment and should never be used as treatment guidelines. Proprietary information of CIGNA. Copyright ©2009 CIGNA

Coverage Policy

Coverage for bathroom and toilet equipment and supplies is subject to the terms, conditions and limitations of the applicable benefit plan's Durable Medical Equipment (DME) benefit and schedule of copayments. In addition, some bathroom and toilet equipment and supplies are specifically excluded under some benefit plans. Please refer to the applicable benefit plan document to determine benefit availability and the terms, conditions and limitations of coverage. Under many benefit plans, coverage for DME is limited to the lowest-cost alternative.

If coverage for bathroom and toilet equipment and supplies is available, the following conditions of coverage apply.

CIGNA covers ANY of the following bathroom and toilet equipment items as medically necessary when the accompanying criteria are met:

- **A raised toilet seat (Health Care Procedure Coding System [HCPCS] E0244)** for an individual who is physically incapable of either lowering onto or rising up from a standard home toilet because of a medical or surgical condition (e.g., post-operatively following total hip or total knee replacement).
- **A standard stationary commode chair (HCPCS E0163[†])** when, because of a medical or surgical condition, an individual is confined to a room; a home lacking a toilet; or a single level in a home lacking a toilet on that level.

- **An extra-wide, heavy-duty stationary commode chair (HCPCS E0168[†])** when the individual meets medical necessity criteria for a standard commode chair and weighs ≥ 300 pounds.
- **A stationary commode chair with detachable arms (HCPCS E0165[†])** when the individual meets medical necessity criteria for a standard commode chair but requires either extra width or detachable arms to facilitate transfers.
- **A sitz bath (HCPCS E0160, E0161, E0162)** when the individual has a perineal injury or infection and the item is part of a medically necessary prescribed treatment regimen.
- **Standard portable whirlpool equipment (HCPCS E1300)** when used as part of a prescribed medically necessary home physical therapy program for wound care and/or wound debridement.

[†]**Note:** Coverage is limited to a *stationary* commode.

In general, CIGNA considers duplicate equipment a convenience item and not medically necessary thus not covered. Replacement of medically necessary bathroom and toilet equipment and/or supplies is covered only when there is anatomical change or when reasonable wear and tear renders the item nonfunctioning and not repairable.

CIGNA does not cover ANY of the following items because each is considered one or more of the following: not medically necessary, not primarily medical in nature, a self-help or convenience item; and/or specifically excluded under the benefit plans (This list may not be all-inclusive):

- bath benches, bath stools, and/or transfer benches (HCPCS E0245, E0247, E0248)
- bath lifts (HCPCS E0625)
- bath mats
- bathtub rails and/or safety grab bars (HCPCS E0241, E0242, E0246)
- bathtub seats (HCPCS E0240)
- commode chair seat lift mechanism (HCPCS E0170, E0171)
- foot rests (HCPCS E0175)
- hand-held shower devices
- mobile commode chairs
- non-portable whirlpools (HCPCS E1310)
- paraffin baths (HCPCS E0235)
- saunas
- spas
- toilet rails (HCPCS E0243)
- wheelchair commode seat (HCPCS E0968)

General Background

Durable medical equipment is defined as items that are designed for and able to withstand repeated use by more than one person; customarily serve a medical purpose; generally are not useful in the absence of illness or injury; are appropriate for use in the home; and are not disposable. Most bathroom and toilet supplies do not customarily serve a medical purpose and are primarily used for convenience in the home. Additionally, when certain conditions result in physical limitations for patients, environmental modifications may be necessary. Environmental modifications are considered not primarily medical in nature.

Raised toilet seats, bedside commodes, sitz baths and portable whirlpools meet the definition of durable medical equipment. Other bathroom and toilet items, such as bathtub seats, benches, bath lifts, and safety grab bars, non-portable whirlpools, bathtub rails, toilet rails, hand-held shower devices, paraffin baths, saunas and bath mats are considered self-help and convenience items that are primarily not medical in nature and therefore not considered medically necessary.

Raised toilet seats (HCPCS E0244) are used to allow patients to lower themselves to a toilet, and may be considered medically necessary, for conditions such as postoperative total hip replacement and postoperative total knee replacement. Postoperatively, following total hip replacement, it is necessary to keep the knee lower

than the hip. Postoperatively, following total knee replacement, the patient's bending capability and lower extremity strength are decreased.

A commode chair (HCPCS E0163) is a portable toilet and may be medically necessary when a patient is unable to use standard bathroom facilities.

An extra-wide, heavy-duty commode chair (HCPCS E0168) is defined as one that has a width of greater than or equal to 23 inches and is capable of supporting a patient who weighs 300 pounds or more. An extra-wide, heavy-duty commode chair may be medically necessary for a patient who weighs 300 or more pounds and meets the basic coverage criteria for a standard commode chair.

A commode chair with detachable arms (HCPCS E0165) may be medically necessary if this feature is required to transfer a patient or if the patient requires extra width and meets the basic medical necessity criteria for a standard commode chair.

A commode chair with seat lift mechanism (HCPCS E0170, E0171, E0172, E0968), either electric or nonelectric, is not considered medically necessary.

Mobile (wheeled) commode chairs are not considered medically necessary.

A foot rest for use with a commode chair (HCPCS E0175) is not medical in nature and is not considered medically necessary.

Sitz baths (HCPCS E0160, E0161, E0162) may be items that are considered medically necessary if the patient had an infection or perineal injury and the item has been prescribed by a physician as part of a medically necessary planned treatment regimen in the patient's home.

Safety grab bars (HCPCS E0241, E0242, E0243, E0246) and saunas are items or equipment used primarily for comfort or convenience.

Standard portable whirlpool equipment (HCPCS E1300) may be medically necessary in the home only when ordered by a physician as a required part of a medically necessary home physical therapy program for wound care and debridement of a wound on an extremity. Paraffin bath units (HCPCS E0235) and non-portable whirlpool baths (HCPCS E1310) are not generally accepted by the medical profession as therapeutically effective.

Bathtub seats and bath benches, bath lifts, bathtub rails, toilet rails, bath stools, hand-held shower devices, bath mats, and spas (HCPCS E0240, E0245, E0247, E0248) are hygienic items or items of self-help.

Summary

Bathroom and toilet equipment and supplies are often used for convenience in the home and generally do not serve a medical purpose. Medical conditions that result in physical limitations for patients may require patient education and modifications to the home environment for prevention of injury. Environmental modifications are not primarily medical in nature. Devices such as raised toilet seats, commode chairs, sitz baths and portable whirlpools may be medically necessary when prescribed as part of a medical treatment plan for injury, infection, or conditions that result in physical limitations.

Coding/Billing Information

Note: This list of codes may not be all-inclusive.

Covered when medically necessary:

HCPCS Codes	Description
E0160	Sitz type bath or equipment, portable, used with or without commode

E0161	Sitz type bath or equipment, portable, used with or without commode, with faucet attachments
E0162	Sitz bath chair
E0163 [†]	Commode chair; mobile or stationary, with fixed arms
E0165 [†]	Commode chair, mobile or stationary, with detachable arms
E0168 [†]	Commode chair, extra wide and /or heavy duty, stationary or mobile, with or without arms, any type, each
E0244	Raised toilet seat
E1300	Whirlpool; portable (over tub type)

[†]Note: Coverage of these items is limited to a stationary commode.

ICD-9-CM Diagnosis Codes	Description
V43.64	Hip joint replacement by other means
V43.65	Knee joint replacement by other means
959.14	Other injury of external genitals
	Multiple/Varied codes

Not Medically Necessary/Convenience/Not Covered:

HCPCS Codes	Description
E0170	Commode chair with integrated seat lift mechanism, electric, any type
E0171	Commode chair with integrated seat lift mechanism, non-electric, any type
E0172	Seat lift mechanism placed over or on top of toilet, any type
E0175	Foot rest, for use with commode chair, each
E0235	Paraffin bath unit, portable
E0240	Bath/shower chair, with or without wheels, any size
E0241	Bathtub wall rail, each
E0242	Bathtub rail, floor base
E0243	Toilet rail, each
E0245	Tub stool or bench
E0246	Transfer tub rail attachment
E0247	Transfer bench for tub or toilet with or without commode opening
E0248	Transfer bench, heavy duty, for tub or toilet with or without commode opening
E0625	Patient lift, bathroom or toilet, not otherwise classified
E0968	Commode seat, wheelchair
E1310	Whirlpool, nonportable (built-in type)

ICD-9-CM Diagnosis Codes	Description
	Multiple/Varied

*Current Procedural Terminology (CPT®) ©2008 American Medical Association: Chicago, IL.

References

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Policy History

Pre-Merger Organizations	Last Review Date	Policy Number	Title
CIGNA HealthCare	5/15/2007	0072	Bathroom and Toilet Equipment and Supplies

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Connecticut General Life Insurance Company has acquired the business of Great-West Healthcare from Great-West Life & Annuity Insurance Company (GWLA). Certain products continue to be provided by GWLA (Life, Accident and Disability, and Excess Loss). GWLA is not licensed to do business in New York. In New York, these products are sold by GWLA's subsidiary, First Great-West Life & Annuity Insurance Company, White Plains, N.Y.